

# Somerset Health and Wellbeing Board Annual Report 2017-18



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### **MESSAGE FROM THE CHAIR**

This year the Board has focused on putting prevention at the heart of everything we do in Somerset. I am pleased to report that all six Somerset Local Authorities, Avon and Somerset Police, the Somerset Clinical Commissioning Group, the three NHS Foundation Trusts and St Margaret's Hospice Care have now signed the *Somerset Prevention Charter* and have backed this up



with Prevention and Health and Wellbeing plans, which will turn the Charter into action. A particular cause for celebration from our joint efforts is the achievement of 1000 more children born into to smoke free homes in Somerset.

As we all know, our communities and neighbourhoods play a vital role in supporting health and wellbeing and we have continued to have a strong focus on building healthy communities, particularly through work on reducing loneliness in our communities through local action and through the development of the Somerset Strategic Housing Framework.

The Board has had oversight of health and care plans being developed through the Somerset Sustainability and Transformation Plan, and more recently through the developing Somerset Health and Social Care Commissioning Strategy. A real success this year, through the Better Care Fund, has been the development of "Home First", a joint health and social care initiative which has been successful in supporting people to get to get back home after a stay in hospital.

I am delighted that this year Somerset became the first area in the country to formally agreed to have two Mental Health Champions, one for adults and one for children. This initiative is promoted through the Local Government Mental Health Challenge. I am also pleased to report that we have continued to work closely with the Children's Trust and to support the Children's Plan for Somerset; in particular we have prioritised work on addressing the impact of harmful adult behaviours on children as a result of substance use and mental health problems.

The Board has recently begun work on developing a new Health and Wellbeing Strategy for Somerset. Much has changed since 2013 when our current strategy was launched and we need a new vision and ambitions to take us into the future. The new strategy will be called *Improving Lives* and it will build on and extend the total place approach to prevention developed through our Prevention Charter. We will be seeking feedback on the new vision and priorities in the coming year and I do hope that you will take the opportunity to become involved.

I would like to take this opportunity to thank Board members and all those who work so hard in our organisations and our communities to improve the Health and Wellbeing of the people of Somerset

Cle Lawrence.

Cllr Christine Lawrence Chair Health and Wellbeing Board 2017–2018



# INTRODUCTION

Health and Wellbeing Boards are an important feature of the reforms introduced by the Health and Social Care Act (2012). These Boards are constituted as formal committees of all upper tier local authorities and form part of the role that local authorities now have to improve the health of their population.

The Health and Wellbeing Board has the following four statutory duties:

- The Board must have a Health and Wellbeing Strategy for its population in place
- The Board must produce a Joint Strategic Needs Assessment (JSNA) to inform planning and commissioning
- The Board must produce a Pharmaceutical Needs Assessment (PNA) for the area
- The Board must oversee the Better Care Fund (BCF) and promote the integration of health, public health and social care where appropriate

In addition to fulfilling its statutory duties, the Somerset Health and Wellbeing Board undertakes to progress health improvement though a number of specific workstreams each year, as well as taking an oversight and influencing role across the whole health and wellbeing system.

The work of the Board for 2017/18 can be seen summarised on the plan on a page in Appendix 1.

This report sets out the progress made under each of the following Board functions:

- Fulfilment of Statutory Duties
- Health Improvement Workstreams
- System Oversight and Influence

Over the course of the year the Board has taken an in depth look at a number of issues. This activity both informs the Board and influences the strategic direction of the areas work under consideration. Topics this year have included a workshop on End of Life Care led by Somerset Palliative Care Consultants and their teams supported by the Clinical Director from St Margaret's Hospice Care; and a workshop looking at Urgent and Emergency Care with presentations from the Chair of the CCG supported by the Urgent Care Board. Consideration was also given to new models of care, to equality and health and to the development of the future Health and Wellbeing Strategy.

# **COMMUNICATION AND ENGAGEMENT**

The diverse voices, views and experiences of the people of Somerset are important in shaping the work of the Board; and the Board needs to communicate with a wide range of partners who are keen to know about the strategic direction for health and wellbeing in Somerset. This happens in a number of ways and all of the Board members are active in supporting this dialogue through their various networks.

Members of the public are able to attend the Board in person to make a short statement and the Board welcomes this representation.

Healthwatch is the statutory partner which represents the voice of patients and the public on the Board. In November the Board received the annual Healthwatch Report, which reported on work undertaken on Early Supported Discharge for Stroke Services, a review of mental health inpatient services and a survey looking at how people prefer to receive health advice and services. This year the Board said thank you and farewell to the Care Forum and in turn, welcomed Evolving Communities as the new Healthwatch partner in Somerset.

District Health and Wellbeing Networks and NHS Patient Forums continue to provide opportunities for more local engagement and, when required, consultation. Over the past year, engagement events have taken place to discuss new models of health and care and to progress work locally which is focused on preventing loneliness. Board partners have participated in a Somerset-wide public consultation on the Somerset Strategic Housing Framework, supporting one of the Board's key priorities around Health and Housing. The multi-agency Stronger Communities for Somerset Group has undertaken a major engagement exercise using community researchers to speak to voluntary groups and charities about their views on social prescribing solutions, which will inform future decisions about this work.

During the year engagement conversations were started in support of the new Health and Wellbeing Strategy; this will move to full public consultation in June 2018.



# EQUALITY AND DIVESITY

The unequal experiences of health services and of health outcomes by different groups are well documented and the Board is mindful of its duties in this respect. The Joint Strategic Needs Assessment describes these differences and the Board work programme reflects the specific needs and issues identified.

Older age and disability have featured strongly in work considered by the Board this year and a strong emphasis has been placed on ensuring that Somerset health and care systems enable people to remain in good health and to be independent for as long as possible.

The Board works with the Children's Trust to ensure that the health needs of children and young people are addressed. This year the Board has received a paper on the 2016 – 2019 Children's Plan for Somerset. The Board also received the annual report of the Somerset Safeguarding Children's Board and the annual report of the Somerset Community Safety Partnership which had a particular focus on children vulnerable through violence and exploitation.

The Board is very mindful of the vital role that carers play and representatives from Carers' Voice and the Parent Carers' Forum have presented formal reports and have raised public questions.

This year the Board received a health report on Gypsy and Traveller Health and has supported work to further develop a Somerset Gypsy and Traveller Forum to foster better linkages between Gypsy and Traveller communities and the health system. Local Gypsy and Traveller representatives participated in the St Margaret's Hospice Fit for the Future Review, contributing their views about community needs and perspectives.



# AREAS FOR IMPROVEMENT

While the Health and Wellbeing Board has met all of its statutory responsibilities this year and has achieved some notable successes in relation to reducing the impact of smoking in pregnancy, reducing delayed transfers of care from hospital to home and ensuring that the new Housing Framework or Somerset addresses the impacts of housing on health, there remain a number areas where the Board has not managed to achieve as well as it would like.

In particular, progress on the Somerset Sustainability Transformation Plan (STP) has been slower than expected. However, this process is now being 'reset' in Somerset by the recently launched '*Fit for The Future*' programme through which the Clinical Commissioning Group (CCG) and Somerset County Council (SCC) will work closely with patients, staff and members of the public will be reviewing five key areas of clinical care:

- urgent and emergency care
- proactive care for frail and elderly people
- planned care such as hip replacements
- children and maternity care
- care for people living with mental health and learning disabilities

The Health and Wellbeing Board will have a key role in supporting the Fit for the Future process and in ensuring that new approach to Health and Social Care addresses the promotion of good health, the prevention of ill health and the reduction of health inequality.

Building Stronger Communities has been a priority for the Health and Wellbeing Board since 2013. While good progress had been made in some areas, such as tackling loneliness, and the establishment of a Somerset Fund, a systematic approach has not yet been developed. Research, engagement and consultation undertaken initially for the STP, and subsequently in collaboration with Richmond Group exploring the viability of Social Impact Bond Funding, provides a strong basis upon which to grow and spread a more systematic approach.

Work on alcohol licencing and health which was taken forward in previous years has unfortunately stalled due to lack of impetus and difficulties in data sharing agreements. This work, focused on the identification of alcohol harm hot spots through Emergency Department data, an approach which has proved effective elsewhere in the country. This work was taken forward as part of the Somerset Academy Project, but as yet has not been fully resolved.

Finally, our Health Outcome data tells us that Somerset, along with the rest of the South West of England, continues to have a high level of hospital admissions for self-harm, particularly among young people. This is an issue of concern and will be an area of continued focus in partnership with the Children Trust Board.

# **SECTION 1 – FULFILMENT OF STAUTORY DUTIES**

#### Somerset Health and Wellbeing Strategy

The Health and Wellbeing Board is responsible for ensuring that there is a strategy in place which sets out a shared vision for improving health and wellbeing and which also addresses issues of health inequality, and how this might be reduced.

The Somerset Health and Wellbeing Strategy 2013-2018 identified three themes to reflect what people and organisations said were the most important things that would improve health and wellbeing locally. Information and data collected through the Joint Strategic Needs Assessment was used to inform these priorities. This strategy has set the scene for the Health and Wellbeing Board to make the vision for health and wellbeing in Somerset a reality through its work programme.

Somerset Health and Wellbeing Strategy 2013-2018

- Theme 1: People, families and communities take responsibility for their own health and wellbeing.
- Theme 2: Families and communities are thriving and resilient.
- Theme 3: Somerset people are able to live independently.

As the current strategy draws to a close, a new strategy is in development. This work has been aligned to a *One Somerset Vision* which will create a greater alignment between the work of the Health and Wellbeing Board and the strategic direction of the Somerset Local Authorities.

The new Health and Wellbeing Strategy will be called *Improving Lives* and this will be moving to full public consultation in June 2018.

#### Somerset Joint Strategic Needs Assessment (JSNA)

The Health and Wellbeing Board is responsible for the production of a Joint Strategic Needs Assessment which takes account of both analytics and also people's experiences and views. This information must be made widely available and commissioners, policy makers and health and care organisations are expected to take this information into account when planning and delivering services. The Joint Strategic Needs Assessment includes up to date information on health and care needs, as well as on the wider determinants of health such as housing and transport. The Somerset Joint Strategic Needs Assessment can be found on the Somerset Intelligence website www.somersetintelligence.org.uk/jsna.

In addition to the web-based information, a thematic report is produced annually on a topic selected by the Board. Previous thematic reports have focused on the needs of Vulnerable Young People and on Healthy Ageing. To support the development of the new Health and Wellbeing Strategy, the Joint Strategic Needs Assessment for 2017-18 has focused on summarising all of the knowledge developed to date about

Somerset and its population health needs. A series of summary reports linked to web-based information will be published alongside the consultation on the draft Health and Wellbeing Strategy to the support consideration of future priorities

#### Somerset Pharmaceutical Needs Assessment (PNA)

A Pharmaceutical Needs Assessment must be produced every three years as a report *from* the Board to NHS England to support NHS England to make informed decisions in the 'market entry' process for pharmacies. The Board is required to state whether there are gaps in access to pharmacies or in the pharmaceutical services provided by dispensing GPs. NHS England is required to commission services to meet any identified gaps not met by commercial pharmacy services.

The Pharmaceutical Needs Assessment published in January 2018 did not find any gaps in Somerset pharmaceutical provision, and despite the growth in population and housing, does not predict that gaps will emerge before the Pharmaceutical Needs Assessment is revised in 2021.

### The Better Care Fund (BCF) 2017/18

The Better Care Fund brings together health and social care funding to support the integration of health and social care. The fund is an opportunity for local services to transform services and improve the lives of the people who need it the most. The Health and Wellbeing Board has an oversight and assurance role around health and care integration and must sign off the annual Better Care Fund plan.

Through the Better Care Fund four schemes were progressed during 2017/18. These were:

- Reablement
- Joined-up person-centred care
- Improved discharge arrangements
- Housing adaptations

The total Better Care Fund for 2017/18 was £51,682,300. Performance is measured against a number of nationally set ambitions.

Somerset has made good progress on the ambition to reduce Delayed Transfers of Care (DToC), largely achieved through a new approach called 'Home First'. Whilst demands on the hospital system continue, this new approach supports people to get home quickly and safely.

Somerset is also achieving good outcomes against a related target which is the proportion of older people (65+) who are still at home 91 days after discharge from hospital through good reablement/rehabilitation services.

Both of these outcomes are important, because the longer people stay in hospital, the less good their long-term recovery is likely to be. So it's excellent to see that good progress is being made in getting people out of hospital and back home to regain their independence.

There is still further work to do to reduce unplanned admissions into hospital and the annual target was not met. The Somerset Clinical Commissioning Group is working with the Academic Health Science Network to try to understand the continued pressure on emergency admissions, and is exploring community health solutions to try to address this. Somerset County Council is looking with partners at how best to transfer the successes and principles of the discharge processes to help prevent admissions using joined-up and proportionate community health and care.

There is also further work required to reduce the number of permanent admissions to residential care. This has reduced slightly this year, largely as a result of the success of the Home First and Reablement Services, which have supported people get back to their own homes after a stay in hospital. However, the annual target has not been met. Further culture change in practice and greater public awareness will be required to achieve this.

# **SECTION 2 – PRIORITY WORKSTREAMS 2017–18**

Workstreams are one of the means by which the Board implements the Health and Wellbeing Strategy. Workstream priorities are agreed annually and progress is monitored through a performance score-card. This is considered bi-monthly by the Health and Wellbeing Board Executive Group and twice yearly by the full Board. Each Workstream has a nominated lead.

#### **Workstream 1: To provide joint leadership for prevention across the county** *Lead: Trudi Grant, Director of Public Health*

The development of the Somerset Prevention Charter has galvanised action around prevention and signatories all now have prevention plans in place or have these recognised in their corporate plans. The Board is collecting interesting and inspiring prevention stories which illustrate the many different forms which effective prevention can take. These are published on the Board webpages, and we welcome more examples.

A number of prevention business cases were developed to support the Sustainability and Transformation Plan (STP) and these are now also supporting the new Joint Health and Social Care Strategy for Somerset. This Strategy places specific focus on improving health and wellbeing and prevention of ill health. Tackling health inequality is an important strand of this work.

A new *Vision* for Somerset '*Improving Lives*' sets the scene for a new and exciting approach to building healthy people and places in Somerset through a wider focus on environment, infrastructure, housing and the economy as well as on fostering health through education, employment, lifestyle choices and access to health and other services.

# Workstream 2: To give system leadership to build strong, resilient and healthy communities

Leads: Teresa Harvey, Chris Phillips, Mark Leeman, Pip Cannons

Building stronger communities remains a key focus for the Board. This theme is about both people and the places they live in.

Work has continued on addressing loneliness; this has been taken forward by district, town and parish councils and supported by voluntary sector colleagues through local action. District councils have active, strong leadership around dementia, adopting the Dementia-Friendly Charter and working with the NHS and County Council through the Dementia Strategy Group to promote a strong focus on living well with dementia. Led by Somerset County Council, a *Somerset Fund* has been established as an innovative step in developing a One Somerset approach to supporting community activity through grants, an area identified as a key gap by last year's State of the Voluntary Sector report.

Joint work through the STP around stronger communities has focused exploring on asset-based approaches and social prescribing for health and wellbeing.

# Workstream 3: To drive and oversee new, integrated and sustainable models of care across the county

Lead: Stephen Chandler

Local action saw an improvement in the proportion of older people (65 and over) who were still at home 91 days after discharge from hospital and in delayed discharge from care. This was supported by Home First, a new programme focused on timely discharge to allow people to return home from hospital more quickly than previously. Despite an immensely challenging winter, this approach has enabled delayed transfers of care to not become an overriding issue in relation to hospital capacity.

# Workstream 4: To improve identification and early intervention to prevent Hidden Harm of children

Lead: Alison Bell, Deborah Howard

The behaviours of adults can harm children; the focus here is on a combination of drug and alcohol use, mental health problems and domestic violence. Improvements have been made in the identification of these risks to children. This approach has been built into service contracts and multi-agency training and awareness-raising has been being developed. This work supports the Somerset "Think Family" approach and the development of a single approach to multiple vulnerabilities, both now key themes for Somerset.

# Workstream 5: To identify and address the impacts of housing on health and wellbeing

Lead: Tracy Aarons

The Health and Wellbeing Board has actively supported the development of a Strategic Housing Framework for Somerset, which directly addresses the impacts of housing on health. The framework, which is currently under consultation, has a focus on homes to support independent living for all ages, affordability and the provision of good quality of homes of all tenures. Greater use of Health Impact Assessments within housing developments are proposed to ensure that new developments are designed to support and promote healthy living.

The Positive Lives framework focuses on the needs of people with multiple and complex needs as a result of homelessness, substance use, mental health issues or antisocial behaviours, including violence. A strong cross sector partnership supports innovative working relationships between organisations to find new solutions with and for these individuals. Creative new approaches include trialling a night stop for adults, focusing on finding more permanent accommodation early on, looking at small supportive units of accommodation and developing a health coach approach to support wellbeing and healthy living. Feedback from users is positive and a collection of short videos, provided quarterly by organisations working within the Positive Lives framework, is building a strong record of the users' experiences, which include moving into permanent accommodation, addressing health issues and gaining employment.

Work to create more effective housing outcomes for people living with mental health issues has proved to be a more difficult topic but there has been good support from agencies involved. The use of case studies has proved effective in understanding the issues from a client's perspective including how it 'feels' to be within 'the system' and has been helpful in understanding where improvements could be made.

### Section 3 – System Oversight and Influence

#### Strategic Oversight of Health and Wellbeing Strategies and Plans

The Board maintains oversight of a number of strategies, ensuring alignment with the Joint Strategic Needs Assessment and the Health and Wellbeing Strategy. Oversight also provides an opportunity for the escalation of issues that can only be resolved through multi-agency collaboration or holding partners to account.

Building on the Somerset Sustainability and Transformation Plan (STP), work has recently begun on *Fit for the Future*, a new health and care commissioning strategy for Somerset. The Board has an active role in the oversight of the work both of the STP and the new *Fit for the Future* strategy. In addition to receiving formal papers and reports, the Board has undertaken a number of in-depth development sessions with the purpose of informing the strategy and plan.

The Board recognises the vital role that family and friends play as carers and has received representations from carers and carers' representatives throughout the year. This has included the formal report from Carers' Voice on the progress of the Carers' Strategy for Somerset.

Mental health remains a key area for oversight and the Health and Wellbeing Board Chair and the Chair of Children's Scrutiny are now Mental Health Champions for Children and Adults respectively. Health and Wellbeing Board member organisations have all signed up to be *Dementia Friendly* and are actively involved in delivering the Somerset Dementia Strategy. In addition to diagnosis and clinical services, the Board is particularly interested in creating environments which support people to live well with dementia.

The Board received the annual report of the Somerset Autism Strategy, and members have taken a keen interest in the development of clinical services and in work to support greater awareness and autism sensitive services and environments.

The Health and Wellbeing Board works closely with the Children's Trust and receives annual reports from the Children's Trust and the Safeguarding Children's Board. The Director of Children's Services and the Cabinet member for Children are statutory members of the Board, and under their guidance the Board has supported work in developing the Children's Improvement Plan.

The annual report from the Somerset Community Safety Partnership focussed on issues on vulnerability, exploitation and preventing violence.

The adoption of a joint working protocol has supported Chairs of Strategic Boards for Health and Wellbeing, Children and Adults Safeguarding, Community Safety, the Children's Trust and Corporate Parenting Boards to work together on issues of common interest. This year joint work has focused on issues of multiple vulnerability, exploitation and safeguarding.

#### **Health Protection Forum**

The Director of Public Health (DPH) has an assurance role in relation to health protection within Somerset. This duty is discharged on behalf of the DPH by the Health Protection Forum. Health protection work seeks to prevent or reduce harm caused by communicable diseases and minimise the health impact from environmental hazards. The DPH presents an annual report to the Health and Wellbeing Board.

Progress has been made on each of the four key priorities which were identified for 2017/18.

Overall System Resilience: A new Somerset Health and Social Care Emergency Planning Group has been established to ensure that response plans across Somerset are joined up and organisations work collaboratively to achieve resilience. In addition, the Somerset Communicable Disease Incident and Outbreak Operational Response Plan will be finalised and tested in line with the PHE framework and plan template.

*Flu Immunisation:* Preparing for the 2018/19 flu season will continue to be a priority for the Health Protection Forum, due to the significant impact a significant flu season can have on the entire health and social care system. The health and social care system is already under great pressure during a regular winter season so it is vital that all arrangements are in place to ensure that there is an improved uptake of the flu vaccine (especially amongst frontline health and social care workers) and organisations are prepared and resilient in the event of an outbreak.

*Air Quality:* The Somerset Air Quality Steering Group has been meeting regularly to ensure the sign off of the Somerset-wide Air Quality Strategy.

*TB:* The TB strategy and action plan have progressed following a prioritisation exercise held at the network meeting in March 2017. Work continues to focus on implementing local action plan and ensuring there is equity of access to effective diagnosis, treatment, contact tracing and follow up of all patients, according to their needs.

### Annual Report of the Director of Public Health 2017

The DPH is required to produce an annual report, with total freedom over its contents. This provides an opportunity for the DPH to raise any matters of concern, or to describe the broader context of health and wellbeing than may be covered by particular projects.

In 2017 this report covered End of Life Care and the importance of this as a public and population health issue. The report stressed the important role that families and carers play in the last months of life, and how strong communities can provide further support around them. It also urged the wide range of agencies involved in such care to work together effectively, and sent a message to everyone that informed preparation for the end of life could reduce the anxiety for individuals and their families.

# WHAT NEXT FOR 2018-2019

Somerset Clinical Commissioning Group (CCG) and Somerset County Council (SCC) have just launched a joint Health and Social Care consultation called 'Fit for the Future'. The "Fit for the Future" programme will look at the care patients and residents need, where and how it is best provided and how people can expect health and social care provision to look over a long-term timeframe. The Health and Wellbeing Board will have a key role in the development of new approaches to



Health and Social Care in Somerset ensuring that future strategy has a strong focus on improving health and wellbeing and on the prevention of ill health and the reduction of health inequality. Working closely with patients, staff and members of the public the Clinical Commissioning Group (CCG) and Somerset County Council (SCC) will be reviewing five key areas of clinical care:

- urgent and emergency care
- proactive care for frail and elderly people
- planned care such as hip replacements
- children and maternity care
- care for people living with mental health and learning disabilities

During the coming year the Health and Wellbeing Board will be publishing the new Health and Wellbeing Strategy for Somerset. Recognising that fostering good health and preventing ill health is about much more than health services, the new Health and Wellbeing Strategy will align with the *Somerset Vision* and will be called *Improving Lives*. The *Improving Lives Strategy* will set the scene for a new and exciting strategic approach to building healthy people and places in Somerset through a wider focus on environment, infrastructure, housing and the economy as well as on fostering health through education, employment, lifestyle choices and through the *Fit for the Future* programme ensuring timely access to health and other services.

2018 – 2019 promises to be a busy and exciting year and the Health and Wellbeing Board looks forward to working with all of its partners to create a Healthy Somerset.



#### Health and Wellbeing Board Plan on a Page 2017 – 2018

People live healthy and independent lives, supported by thriving and connected communities, with timely and easy access to high quality and efficient public services when they need them.

#### Statutory duties and functions

- Somerset Health and Wellbeing Strategy
- Annual Joint Strategic Needs Assessment

- Somerset Pharmaceutical Needs Assessment
- Health and Social Care Integration including the Better Care Fund

#### Priority Workstreams 2017 - 18

Priority workstreams are informed by the Joint Strategic Needs Assessment and selected as an area of activity to which the Health and Wellbeing Board can bring added value. Priorities and Action is supported by or is designed to gather reliable evidence of effectiveness.

W1: To provide joint leadership for prevention across the county	W2: To give system leadership to build strong, resilient and healthy communities	W3: To drive and oversee new, integrated and sustainable models of care across the county	W4: To further develop work to improve identification and early intervention to prevent Hidden Harm of children
Officer Lead and Board Member Champions: Trudi Grant Cllr Jane Warmington	Officer Lead and Board Member Champions: Teresa Harvey / Mark Leeman / Chris Phillips / Pip Cannons / Carolyn Arscott Cllr Sylvia Seal	Officer Lead and Board Member Champions: Steven Chandler Cllr Nigel Woollcombe –Adams	Officer Leads and Board Member Champions: Alison Bell / Dorothy Mukasa
<ul> <li>Actions:</li> <li>Ensure that Prevention is effectively addressed in the implementation of the Somerset NHS Sustainability and Transformation Plan.</li> <li>Promote the Somerset Prevention Framework and Charter to local organisations</li> <li>Support organisations who adopt the charter to develop plans and actions to deliver prevention outcomes.</li> <li>Produce further three prevention case studies using the prevention framework to describe the type and level of the intended prevention and its actual outcome</li> </ul>	<ul> <li>Actions:</li> <li>To develop asset based approaches to support stronger communities in Somerset.</li> <li>Deliver a new Somerset Strategic Housing Framework to improve housing and related health outcomes for our communities.</li> <li>To develop the Let's End Loneliness in Somerset Programme through the District Councils and Somerset VCS Forum</li> <li>To be assured that the Dementia Multi-Agency Strategy is being taken forward in Somerset</li> </ul>	Actions: • To have effective oversight of the Better Care Fund and Improved Better Care Fund • To have effective oversight of the Joint Commissioning Function	<ul> <li>Actions:</li> <li>Embed the ability of adult mental health services (crisis team, community MH services and mental health social work service) to identify if patients are being identified as parents with dependent children</li> <li>Embed the protocol of Hidden Harm, across adult mental health, domestic abuse and drugs and alcohol services</li> <li>Review Early Help Assessments (EHA) that identify adult mental health, substance misuse or domestic abuse needs.</li> </ul>

#### Oversight and Influence

To ensure all HWB members are well sighted on issues impacting on the health and wellbeing of Somerset and supporting the protection of vulnerable people and implementation of a safeguarding environment the board or its sub-groups will receive reports, at least annually on or from the following:

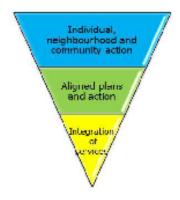
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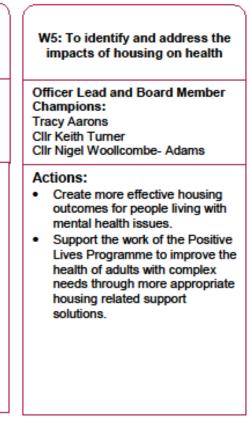
Themes for Board Development Workshops 2017 - 18

- Board Governance and Development
- Health Inclusion and Equality ٠
- Prevention •

- End of Life
- New models of care / Sustainability and Transformation Plan for Somerset

# **Appendix 1**









# **Somerset Prevention Charter**

# OUR DEFINITION

### Prevention means different things to different people.

It can be about:

- preventing harm,
- preventing the need for a service,
- preventing ill health and disease,
- preventing loss of independence,
- preventing risky behaviour
- preventing an existing problem becoming worse.

In essence it's all of these and more. We agree we need to keep a broad view of prevention so we do not miss opportunities to improve the lives of people in Somerset.

# **OUR VISION**

People live healthy and independent lives, supported by thriving and connected communities with timely and easy access to high-quality and efficient public services when they need them.

# OUR PRINCIPLES

#### We agree that:

- Prevention is **everyone's responsibility**; we want children, families, communities and agencies to work together and develop knowledge and skills to live healthily
- We will develop accountability at organisation level for delivery against the charter through regular measuring of progress and achievement
- We want to help everyone to have a good birth, a good life and a dignified death
- We want to provide people with the knowledge, skills, confidence and environment to enable healthy living and minimise unhealthy behaviours that can lead to dependence on health and social care services

- Strategically, a place-based, population, approach to prevention is better; joined up activity and shared investment funding achieves the best outcomes and best value for money
- Prevention activity needs greater shared investment
- Prevention is **equally important** for physical and mental health, social, environmental and economic issues
- Helping people, families and communities build protective factors and resilience to prevent situations escalating or recurring is an important part of our prevention activity
- Providing the **right service** when needed, **in the right place at the right time** helps prevent situations escalating and reduces waste
- Effective prevention needs **joined up information** so all the issues facing people can be understood together and people can receive joined up help.
- **Sharing data** to enable better care, and anonymised data to understand population health, with necessary privacy safeguards, is essential
- We will be clear on what our strengths and weaknesses are and find practical ways to improve

# **OUR ACTION**

We agree that:

- We all have a responsibility to consider prevention opportunities for everyone, and will lead by example
- We will enhance the skills of our front line staff and volunteers, through training, to make every contact count in addressing risks to health
- We need to improve the lives of Somerset people overall but focus our work to **improve the lives of the worst off fastest**
- We will join up our prevention approach and resources to maximise impact at population level
- We will **increase and refocus resources** allocated for preventative activity over time
- For services, prevention will be **done systematically** and built into our systems.
- **No door is the wrong door**, all our staff have a responsibility to help people get the right service at the right time, redirecting supportively if appropriate
- We will have **honest and open discussions** with individuals, families and communities about the issues, their responsibilities and that of public services.
- Where possible and appropriate we will **share information** to help provide people with better support. We will challenge each other and find practical solutions if appropriate information is not being shared.
- We will seek change in local and national policies, or laws, if such change would be most effective in improving prevention

# OUR COMMITMENT

We endorse the Somerset Prevention Charter, committing our organisation to the Vision and Principles and to work with our co-signatories and others to deliver Our Actions.

	MENDIP DISTRICT COUNCIL	Sedgemoor
Avon and Somerset Constabulary	Mendip County Council	Sedgemoor County Council
<b>NHS</b> Somerset Clinical Commissioning Group	SOMERSET County Council	Somerset Partnership
Somerset Clinical Commissioning Group	Somerset County Council	Somerset Partnership
BUTH SOMERS	St. Margarets	TAU NTON Deane Borough Deane Council
South Somerset District Council	St. Margaret's Hospice Care	Taunton Deane Borough Council
Taunton and Somerset NHS Foundation Trust	Yeovil District Hospital NHS Foundation Trust	WEST SOMERSET COUNCIL
Taunton and Somerset Hospital Trust	Yeovil Hospital NHS Trusts	West Somerset

### Somerset Health and Wellbeing Board Members 2017-18

Cllr Christine Lawrence (Chair), Somerset County Council Cllr Frances Nicholson (Vice Chair), Somerset County Council Cllr David Huxtable, Somerset County Council Cllr Linda Vijeh, Somerset County Council Cllr Amanda Broom, Somerset County Council Cllr Sylvia Seal, South Somerset District Council Cllr Gill Slocombe, Sedgemoor District Council Cllr Jane Warmington, Taunton Deane Borough Council Cllr Keith Turner, West Somerset District Council Cllr Nigel Woollcombe- Adams, Mendip District Council Judith Goodchild, Health Watch Trudi Grant, Director of Public Health Stephen Chandler, Director Adult Social Care Julian Wooster, Director Children's Services Dr Ed Ford, Chair, Somerset CCG David Slack, Managing Director, Somerset CCG (to July 2017) Lou Evans, Non-Executive Director, Vice Chair, Somerset CCG (to July 2017) Nick Robinson, Chief Officer, Somerset CCG (from September 2017) Dr Rosie Benneyworth, Director Strategic Services Clinical Transformation Somerset CCG (from January 2018) Mark Cooke, NHS England

http://www.somerset.gov.uk/health-and-wellbeing/somerset-health-and-wellbeing-board/

Somerset Health and Wellbeing Board May 2018



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