

Committee(s):	Date(s):
Community and Children's Services	8 <sup>th</sup> November 2012
Port Health and Environmental Services	13 <sup>th</sup> November 2012
Health and Social Care Scrutiny Sub-Committee	20 <sup>th</sup> November
Energy and Sustainability Sub Committee	3 <sup>rd</sup> December 2012
Subject: Joint Health and Wellbeing Strategy	Public
Report of: Director of Community and Children's Services	For Information
Ward (if appropriate): All	

### Summary

This report outlines the development of the draft City of London Joint Health and Wellbeing Strategy, which is required of local authorities by the Health and Social Care Act 2012

The draft strategy sets out the City of London shadow Health and Wellbeing Board's commitment to improving the health of City residents. The proposed priorities are;

- More people with mental health issues can find effective, joined up help
- More people in the City are socially connected and know where to go for help
- More rough sleepers can get health care, including primary care, when they need it
- More people in the City take advantage of Public Health preventative interventions, with a particular focus on at-risk groups (includes the 3 following areas of focus)
  - People in the City are screened for cancer at the national minimum rate
  - Children in the City are fully vaccinated
  - Older people in the City receive regular health checks
- More people in the City are warm in the winter months
- More people in the City have jobs: more children grow up with economic resources
- City air is healthier to breathe
- More people in the City are physically active
- There is less noise in the City

The draft strategy also makes a commitment to improve the health and wellbeing of City workers and proposes some additional priorities. However, it recognises that until the City's case for additional funding to meet these priorities has been determined only limited progress can be made in addressing them.

## **Recommendations**

- That the Committee notes the content of this report and comments on the draft Joint Health and Wellbeing Strategy

## **Main Report**

### **Background**

1. The Health and Social Care Act 2012 transfers the NHS's public health functions to local authorities, and gives local authorities the duty to advance the health and wellbeing of people who live or work in that area. It also requires local authorities to set up Health and Wellbeing Boards, and for those Health and Wellbeing Boards to produce an annual Joint Strategic Needs Assessment (JSNA) and Joint Health and Wellbeing Strategy (JHWS). The City of London already has a JSNA in place; however, this is the first time that a JHWS has been produced for the City of London.
2. The public health budget allocation for the City of London was indicated to be £1.422 million for 2012/13. This was based on historical public health spend for City and Hackney PCT; however, this sum is expected to decrease on a year-on-year basis, once the final new allocation formula has been determined by the Department of Health. The new budget allocation will be determined on a per-head of resident population basis, and does not take City workers into account; however, the City of London Corporation has made it clear to the Department of Health that the Corporation would welcome the opportunity to make a positive contribution to the health of its workers, many of whom spend the majority of their waking hours inside the square mile, and who access many of their health services from within it.
3. The Department of Health has released a number of Outcomes frameworks. Health and Wellbeing Boards will have their success measured according to The Public Health Outcomes Framework.
4. Although local authorities will be required to provide certain mandated public health functions under the Act, such as the National Child Measurement Programme (NCMP), the majority of public health functions are non-mandated, and levels of provision must be determined locally, according to need.
5. The City of London's Joint Strategic Needs Assessment has already identified priority areas of need, based on a comprehensive review of the available data for the City, local intelligence and consultation. Priorities were identified according to the following criteria:
  - Are there significant unmet needs amenable to intervention?

- Is this an issue which affects a significant proportion of the population (directly or indirectly)
- Is this issue a significant contributor to inequalities in health and wellbeing?
- Is this an issue which significantly affects vulnerable groups?
- Is this a national/London priority?

## **Current Position**

6. The City's shadow Health and Wellbeing Board, which includes representation from the Chairman of the Community and Children's Services Committee; the Director of Community and Children's Services; the Port Health and Public Protection Director; the Director of Public Health for City and Hackney; City and Hackney Clinical Commissioning Group; the City of London Local Involvement Network (LINK); and the City of London Police, has determined the scope, format and content of the draft JHWS.
7. As the shadow Health and Wellbeing Board is not yet a committee of the City of London, the draft JHWS must be signed off by the three bodies which will be represented on the City's Health and Wellbeing Board from April 2013. These are:
  - Community and Children's Services Committee
  - Energy and Sustainability Sub Committee
  - Port Health and Environmental Services Committee

## **Proposals**

8. The JHWS is intended to cover the three year period from 2012/13 to 2015/16. The strategy will be refreshed annually to reflect the changes that have taken place over the year, and to ensure the City is compliant with its statutory obligations. Formal public consultation will be undertaken from the period November 2012 to January 2013.
9. The strategy identifies the need to manage the public health transition smoothly; to improve joint working and integration; and to address key health and wellbeing challenges. These are identified as:
  - More people with mental health issues can find effective, joined up help
  - More people in the City are socially connected and know where to go for help
  - More rough sleepers can get health care, including primary care, when they need it

- More people in the City take advantage of Public Health preventative interventions, with a particular focus on at-risk groups (includes the 3 following areas of focus)
    - People in the City are screened for cancer at the national minimum rate
    - Children in the City are fully vaccinated
    - Older people in the City receive regular health checks
  - More people in the City are warm in the winter months
  - More people in the City have jobs: more children grow up with economic resources
  - City air is healthier to breathe
  - More people in the City are physically active
  - There is less noise in the City
10. These priorities align to the City's JSNA priorities, and are also expected to contribute both directly and indirectly to improving outcomes on the Public Health Outcomes Framework, as well as the Adult Social Care Outcomes Framework and the NHS Outcomes Framework.
11. As local authorities also have a duty to advance the health and wellbeing of people who live or work in that area, the draft JHWS identifies three key areas for improving worker health and wellbeing. The evidence for these priorities comes chiefly from two pieces of research commissioned by the City of London Corporation: *The Public Health and Primary Healthcare Needs of City Workers (2012)* and *Insight into City Drinkers: alcohol use, attitudes, and options for addressing alcohol misuse in the City of London (2012)*. The priorities for City workers are:
- Fewer City workers live with stress, anxiety or depression
  - More City workers have healthy attitudes to alcohol and City drinking
  - More City workers quit or cut down smoking
12. The extent to which these priorities can be met will depend upon whether the City of London receives additional funding, from the Department of Health, for the public health of workers. The research report *The Public Health and Primary Healthcare Needs of City Workers* found that there was widespread demand for public health services (e.g. smoking cessation) to be provided within the Square Mile at times that were convenient for workers. This research was used to lobby the Department of Health to allocate additional funding to the City for the public health of workers.
13. When the draft budget allocation was announced, the Department of Health acknowledged that it did not contain any allowance for non-resident populations. Final budgets will be announced in December 2012.

## **Corporate & Strategic Implications**

14. Once the JHWS is signed off, it will contribute to the priorities of the Corporate Plan by:

- Improving the health of City residents, and tackling health disadvantage in our most vulnerable groups
- Ensuring that excellent public health services continue to be provided in the City of London
- Ensuring that the City workforce is healthy, productive, and protected from public health threats

## **Implications**

15. The JHWS prioritises particular public health functions, and provides a framework for the City of London to allocate the discretionary element of its public health budget.

16. The strategy includes a number of priorities for workers; however, if no funding is available from DH to improve public health provision for City of London workers, it would not be appropriate to fund these activities from a budget allocated to residents.

## **Conclusion**

17. The Joint Health and Wellbeing Strategy represents an opportunity for the City of London to demonstrate its commitment to meeting its new public health responsibilities, whilst responding to local need. Once signed off, it will provide a valuable framework for improving the health of both residents and workers in the City of London.

## **Background Papers:**

Health and Wellbeing Profile 2011 (JSNA) – *Community and Children's Services, February 2012* and *Health and Social Care Scrutiny Subcommittee, March 2012*

Research into City Worker Health and Healthcare Needs – *Community and Children's Services, May 2012*

The Public Health and Primary Healthcare Needs of City Workers (2012) City of London Research Report.

## **Appendices**

Draft City of London Joint Health and Wellbeing Strategy

## **Contact:**

*Farrah Hart, Healthy City Development Manager |  
farrah.hart@cityoflondon.gov.uk | 020 7332 1907*