Appendix 1

**Organisation/Partnership:** Pendle LSP Health Improvement Group

This is a response on behalf of Pendle LSP Health Improvement Group which incorporates individual contributions from:

* East Lancashire Health Improvement Service
* Lancashire Care Foundation Trust (Sexual Health Services)
* Pendle Leisure Trust
* Help Direct

The Pendle LSP Health and Well Being Group exists to support and advance health improvement in the borough of Pendle with a particular emphasis on reducing health inequalities. It has a broad based membership and over the past twelve months has been addressing issues such as: Infant Mortality, Tobacco Control, Emotional Health & Well Being and Equitable Access to Services.

The responses below had been fed back by individual member organisations as part of a collective response on behalf of the group:

1. **What recommendations would you make to strengthen the emerging strategy?**
2. Prioritise early intervention strategy to increase knowledge and to educate front line workers & the population. Examples of these are
* Identification Brief advice training for alcohol
* Access to initiatives which will allow people at improve their Health and Wellbeing
1. Include a positive approach to contraceptive and sexual health empowering communities to take a proactive rather than reactive response for their own sexual health and well-being
2. To recognise the importance of physical activity, exercise as well as mental stimulation and social interaction in the overall structure
* To recognise how this can have a positive impact on “Health Improvement”, both with physical and mental wellbeing.
* The ability to then be able to produce a structured, inclusive, holistic and balanced approach that can both improve the chances of gaining early intervention wins and also long term health changes as well as the reduction in medical intervention costs.
1. Working together is a must if we want to improve the Health & Wellbeing of the community. We need to embrace and utilise other services in order to get result

**Organisation/ Partnership: Pendle Leisure Trust**

1. **What recommendations would you make to strengthen the emerging strategy?**

To recognise the importance of physical activity, exercise as well as mental stimulation and social interaction in the overall structure.

To recognise how this can have a positive impact on “Health Improvement”, both with physical and mental wellbeing.

The ability to then be able to produce a structured, inclusive, holistic and balanced approach that can both improve the chances of gaining early intervention wins and also long term health changes as well as the reduction in medical intervention costs.

**Organisation/Partnership:** Carers Strategy Officer LCC

1. **What recommendations would you make to strengthen the emerging strategy?**

Increasing the scope within the strategy to include  supporting a broader range of carers than just carers of people with dementia, for example, support to carers caring for a relative with a long term condition.

**Organisation/Partnership:** Citizens Advice Bureau

**1 What recommendations would you make to strengthen the emerging strategy?**

Mental Health is listed as a priority outcome within the strategy and we feel that the strategy would be strengthened by the inclusion of Information and Advice as tools to both address and prevent mental health issues occurring. Improvement in a client’s mental health is proven to increase both their physical and emotional wellbeing, resulting in a more holistic approach to people's Health and Wellbeing.

We also feel that many of the Interventions listed may not demonstrate much in the way of impact. For example, what do we mean by ‘encourage people to take control’, the results could be a figure stating how many people have been encouraged. A better statement may be to seek to ‘Enable people to take control of their own health and wellbeing’. We could monitor outcomes of this which would show a better impact than ‘encouraging’ someone to do so.

We also wanted to know what was meant by ‘Holistic Support’. Should we not specify practical interventions such as: Provide a range of information, advice and practical help/services to vulnerable families.

**Organisation/Partnership**: Hyndburn Over 50's Forum

**1 What recommendations would you make to strengthen the emerging strategy?**

The forum welcomes the strategy and believes that working with partners and the strength that this will bring will help deliver a good quality of health and wellbeing in Lancashire. All the priority shifts are important in particular to our forum are priorities 1 and 4 priority health & wellbeing outcomes we welcome item 4. Improving health and independence of older people 65 and over interventions. Our priorities are listed but we welcome the other important issues identified.

**Organisation/Partnership:** Age Concern Central Lancashire and Help Direct (Preston and South Ribble) –

 **1.** **What recommendations would you make to strengthen the emerging strategy?**

 On a general point we feel it would be advantageous if there could be some clarity on the expectations on the role of the VCFS in its engagements with the Health and Wellbeing Boards at both a county and a local level.  Are we the “critical friend”, an equal partner or “need to be seen to be engaged with”.

We feel there should be emphasis reflecting housing and local infrastructure particularly when considering the substantial changes born via Local Development Frameworks (LDF) across Lancashire, the initial proposals appear to largely miss the LDF and associated implications e.g.

Housing delivery

Housing density

Housing quality

Affordable housing

Design of buildings

Travel

(See attached for examples)

Unless the Board adopts a process for strategic interventions such as assessing and influencing large scale change E.G. through the LDF and Lancashire Transport Plan (LTP3) then the priority ‘lower level’ health and wellbeing outcomes listed will not achieve the fundamental change necessary to narrow inequality gaps and achieve health equity. There appears to be a void at the strategic intelligence / influencing level. Perhaps this could be listed under Table 1 as a particular action.

Beyond the quick win interventions listed how, in the longer term, does the Board anticipate it will achieve the desired outcomes.

What level of Equality Impact Assessment is being undertaken in line with the Boards developing strategy and is this available for comment?

The ‘Lancashire Directors of Public Health Report’ 2010/2011 compiled by Frank Atherton, Maggi Morris and Sohail Bhatti hoped that the ‘Health and Wellbeing Board will use these priorities and recommendations as the basis of its Health and Wellbeing Strategy’. These were:

Reduce unemployment and worklessness

Increase income and reduce poverty

Strengthen communities

Increase opportunities for life long learning and skills development

Reduce alcohol and tobacco consumption

Increase social support

Copy link <http://www.clph.net/page.aspx?pageid=848&ParentID=0>

To what degree have the H&W Board considered these recommendations and the report findings/content in general.

**Priority shifts in ways of working**

In table 1 we would like to suggest an expansion of the 2nd bullet to include “ensuring existing VCFS services are engaged and encompassed within future service provision, where they add value.

On the fifth bullet in table 1 the lack of clarity on envisaged role of the VCF sector makes this hard to comment on.  As recipients of contracts or grants from statutory bodies we could not pool those and we would have concerns at any suggestion of pooling our own reserves/resources unless the use was deemed appropriate by our own governance structures.  However it is anticipated that there would be many shared priorities and where possible joint working would be actively welcomed .  Some good examples are currently in place around working with LCC and the PCT around the Crisis Lite service.

We would like to see ensure reducing duplication as a priority shift.  A current example is the insistence in South Ribble and Chorley by the PCT of the development of a standalone website on Health and Wellbeing when there is already the Help Direct Wellbeing directory and the developing Pow Wow Website.  All requiring self management and update by VCFS partners along with our own web sites.

**Priority Health and Wellbeing outcomes**

We wonder if in points 2 and 4 the final points around support should be with the purpose of “enabling them to” play a full and active role.

**Delivering early wins**

We are slightly concerned that there may be a mismatch between the JSNA data, sometimes quite historical, leading to a focus on interventions around young people, and the forecast growth in an aging population.  Whilst we acknowledge that teenage pregnancy, alcohol and smoking in pregnancy are current health targets they seem to be too specific in terms of a strategy.

We would like to see an expansion of the hospital admission intervention to include improving systems of discharge and supporting the reduction of re-admission, including improved access to Community Equipment services.

We feel support for carers is very important and should not appear to be limited to dementia patients, important though that is.  Perhaps the wording needs to be enhanced.

There are two issues and possible interventions which are not covered anywhere and we believe are important.  These are Housing - picking up issues of affordability but more importantly the standard of housing and issues around ownership and challenges faced by older people who are asset rich, resource poor to maintain properties to a standard which reduces negative impacts on health along with the provision of appropriate social/private housing to enable older people to downsize.  The knock on effect is potentially an increase in larger properties for families.

The second issue is transport particularly linked to supporting the reduction in social isolation and improving access to services.

**Organisation/Partnership:** Lancashire Care Foundation Trust – Chai Healthy Living Centre Burnley – Janet Davies

1. **What recommendations would you make to strengthen the emerging strategy?**

The strategy needs to recognise the strengths of existing commissioned services who are meeting and exceeding their targets and engagements with their local communities. The strategy should support building and enhancing successful projects which can hit the ground running and not to constantly reinvent new projects which take time and infrastructure to gain momentum and activity.

**Organisation/Partnership**: Public Member & Chair of Burnley Over50's Forum Tracey Nicola Dyson

1. **What recommendations would you make to strengthen the emerging strategy?**

Listen to the public's expectations

Take account of the social 'background' of users eg lifestyle, housing, work, financial, to focus specialised services.

**Organisation/Partnership:** North Lancs Joint Commissioning Team

**1.What recommendations would you make to strengthen the emerging strategy?**

**Priority outcomes –** there needs to be an emphasis on vulnerable adults who are more at risk than the identified groups e.g. people with Learning Disabilities

**Interventions –** Could the bullet point be altered to be more inclusive?

* Address loneliness in older people and vulnerable adults

Ensure there is an agreed **engagement and communication process** to continue to develop the active involvement of priority groups and minority groups with indentified risk factors e.g. people with learning disabilities

**Organisation/Partnership**: South Ribble Older People’s Forum

1. **What recommendations would you make to strengthen the emerging strategy?**

Consider views of older people through consultation and liason. More information on how the ideology will be achieved with the resources available.

Committed to eliminate age discrimination. Take into account the fact that many older people have difficulty in coping with Information Technology.

Production of an action plan to back up the strategy.

**Organisation/Partnership:** Lancaster City Council

1. **What recommendations would you make to strengthen the emerging strategy?**

The priority shifts in ways of working have to happen if we are going to make a real difference. We must ensure that this happens at all levels within and between organisations and partners and that front line workers are empowered to enable this to happen.

We support the priority health and well being outcomes and would hope that the actions and interventions to deliver these outcomes recognise the important role that district councils have in health improvement e.g. housing, planning, leisure and licensing.

Another key issue will be how to engage our citizens in the strategy and get them interested enough to contribute. Special interest groups will be easier to engage but what about our most vulnerable citizens.

**Organisation/Partnership:** Lancashire Fire and Rescue Service – Paul Richardson

**1. What recommendations would you make to strengthen the emerging strategy?**
In order to contribute effectively to the two main components of the strategy, namely "working together" and "getting results", there needs to be a clear articulation of the specific actions proposed, particularly how they link to the priority Health & Wellbeing outcomes. In addition, it is important for partner organisations to clearly state their own actions to be taken in support of the above. Finally, actions should identify who is responsible, the timescale for completion and a definition of what will consitute success

**Organisation/Partnership:** Burnley Borough Council

The emerging Lancashire Health and Well-being Strategy has been considered at an all-Member briefing, the Council’s Community Services Committee and with the Leader of the Council who is also the Lead Member for Health.

The Council is pleased to provide the following response to your consultation.

**1. What recommendations would you make to strengthen the emerging strategy?**

The Council feels that the explicit aim of narrowing the gap and tackling health inequalities appears to have been watered down within the emerging strategy. We would be very keen to see this being made more explicit as a major cross-cutting aim of the strategy (as was originally intended in earlier discussion documents).

The priority areas within the document align broadly with the priority area of Burnley with the exception of drug and alcohol misuse, although we accept that the priorities have emerged from the Joint Strategic Needs Assessment which looks at priorities for all of Lancashire.

We endorse this approach of using the JSNA, however there does not always appear to be a direct between the priorities and the interventions stated in the document. There are a wide range of existing interventions tackling the priority areas which are currently funded by Primary Care Trusts. The Council is concerned that in the rush to work on a range of new interventions, existing programmes such as BEEP (GP Referral Scheme) which are recognised as effective and good practice will be forgotten and will cease in March 2013. The Council is keen to see that the emerging strategy recognises existing good practice and seeks to ensure its provision in the future.

We would also like the Strategy to recognise more the wider determinants of ill-health in line with Marmot principles.

**Organisation/Partnership:** Hyndburn Borough Council Health and Communities Working Group – Pam Barton, Portfolio Holder for Health and Communities

1. **What recommendations would you make to strengthen the emerging strategy?**

The following points were made from the Health Improvement Team:

* We would like an understanding of what outcomes will be measured and how they will be measured to determine the success of the implementation of items in the strategy.
* How will Hyndburn benefit from this strategy? As a county wide document, can we be sure that individual boroughs (including Hyndburn) with largely varying health needs will have their needs met by this strategy?
* What if things don’t work? What will the system be for decommissioning or re-commisioning services? How at Borough Council level can we feed into the type of services that we feel should be commissioned at a local level?
* We feel that weighting should be on prevention and early intervention services rather than cure

**Organisation/Partnership:** Chorley and South Ribble Health and Wellbeing Partnership

1. **What recommendations would you make to strengthen the emerging strategy?**
2. The Partnership agrees with the priorities and the desire to identify some ‘early success’ interventions articulated in the emerging strategy.
3. There is no explicit acknowledgement of the issue of population/housing growth in the emerging strategy. The Partnership believes the planning and delivery of health infrastructure to meet increased demand should form part of the final strategy.
4. The Partnership would be keen to see some assurance within the final strategy that health issues at a local level will be resourced and addressed.

**Organisation/Partnership:** Lancashire Constabulary

I think this is an excellent draft and would maybe add in reference to how the strategy aims to work across the ‘whole system’ to achieve it’s priority outcomes. The principles of info sharing , default to collaborate are spot on and I would suggest it would carry more impact with some reference to vulnerability i.e. our strategy will recognise that health and wellbeing is about the collective vulnerability of our citizens and that is why collaboration is critical to success.