

## **AGENDA ITEM**

### **REPORT TO HEALTH AND WELL BEING BOARD**

**5 JUNE 2013**

### **REPORT OF DIRECTOR OF PUBLIC HEALTH**

## **THE JOINT HEALTH AND WELLBEING STRATEGY – UPDATE ON DELIVERY PLAN AND PERFORMANCE MONITORING FRAMEWORK**

### **SUMMARY**

This paper provides a progress update on the draft delivery plan for the Joint Stockton Health and Wellbeing Strategy and proposes an approach to performance monitoring for the delivery plan.

### **RECOMMENDATIONS**

The Stockton on Tees Health and Wellbeing Board is asked to consider and agree next steps on the:

1. The potential gaps highlighted from the draft delivery plan.
2. The approach to monitor the delivery plan by the Board and by the Partnership and proposed highlight metrics to be used

### **DETAIL**

#### **Background**

1. The Stockton Joint Health and Wellbeing Strategy sets out a broad strategic overview of how the Health and Wellbeing Board intends to improve health and wellbeing outcomes in the area, including identifying key strategic aims. To ensure these aims are delivered, integrating a health and wellbeing focus across the system, it is important to define a delivery plan identifying the key plans and responsibilities aligned to each aim.
2. The Strategy presents an opportunity to review the approach to meeting health and wellbeing need in Stockton, therefore it is important that the delivery plan covers both current activity and highlights any gaps at strategic level. The Board and Partnership can then consider how potential gaps in plans and / or governance arrangements can be addressed.

#### **Gap analysis**

3. The gap analysis is set out in **Appendix I**. This was compiled by mapping the existing key partnership plans / strategies and accountable groups for delivery

against each strategic objective. Where potential gaps exist, these have been listed in Appendix 1 i.e. where areas of work are not currently covered by strategies or plans and / or an accountable group needs to be identified for the work. Suggested groups have been identified to be accountable for these areas of work. The gap analysis has been developed with contribution from the NHS England Area Team and the CCG.

4. As the CCG further develops its commissioning plans through its Health and Wellbeing workstream in liaison with Health and Wellbeing Board partners, the contribution of these plans to the Joint Health and Wellbeing Strategy delivery plan will be specified and the gap analysis updated as required.
5. In some cases, identifying plans / accountable groups is dependent on the structures that are developing under the Health and Wellbeing Board; and in relation to the CCG and other commissioners, including the proposed Health and Wellbeing commissioning group. Therefore as structures evolve and plans are developed and embedded, the delivery plan and gap analysis may need to be updated. Likewise, discussions regarding funding arrangements will continue as the new structures embed.

#### **Approach to performance monitoring for the Health and Wellbeing Strategy Delivery Plan**

6. **Appendix 2** sets out the proposed headline performance monitoring metrics for the Health and Wellbeing Strategy Delivery Plan. Most recent performance data is included, where this is currently available.
7. It is proposed that the Health and Wellbeing Partnership receives reports on a quarterly basis, on a set of headline metrics (proposed in Table 1 of Appendix 2). These may be supplemented by a small selection of additional more detailed metrics from the full performance monitoring framework as required, to enable the Partnership to examine an issue in more detail or to supplement a topic-based discussion at the Partnership meeting.
8. It is proposed the full set of performance metrics is made available to the Health and Wellbeing Board and Partnership on an annual basis, highlighting areas of particular concern and areas of particularly good performance in a report to the Board. It is suggested the 'additional' metrics set out in Table 2 of Appendix 2 are included in the full set of performance metrics, though these could be added to the set of headline metrics if required.
9. It is proposed the full performance monitoring framework is comprised of the Public Health Outcomes Framework<sup>1</sup>, together with relevant indicators from the Social Care Outcomes Framework<sup>2</sup> and further frameworks for children as they develop, the NHS Outcomes Framework<sup>3</sup> and the Interim CCG Assurance Framework<sup>4</sup>. It is important to note that the assurance frameworks for partner commissioning organisations are still being finalised therefore the metrics proposed here may change. A fully developed set of performance metrics for the delivery plan will therefore be presented to a future meeting.

10. Work is ongoing to develop systems to measure progress against the Public Health Outcomes Framework and to develop appropriate sets of metrics across the different partnership organisations. This includes how data will be accessed and analysed and a Tees Valley-wide workshop is due to be held in May to take this work forward. The delivery plan and associated metrics will need to evolve as this work progresses.

## References

1. Public Health Outcomes Framework for England 2013 to 2016:  
<https://www.gov.uk/government/publications/healthy-lives-healthy-people-improving-outcomes-and-supporting-transparency>
2. Adult Social Care Outcomes Framework 2013 to 2014:  
<https://www.gov.uk/government/publications/the-adult-social-care-outcomes-framework-2013-to-2014>
3. NHS Outcomes Framework 2013 to 2014:  
<https://www.gov.uk/government/publications/nhs-outcomes-framework-2013-to-2014>
4. Interim CCG Assurance Framework for 2013/14:  
<http://www.england.nhs.uk/2013/05/07/interim-ccg-af/>

**Name of Contact Officer: Sarah Bowman**  
**Post Title: Stockton Health Improvement Partnership Manager**  
**Telephone No: (01642) 528173**  
**Email Address: [sarah.bowman@stockton.gov.uk](mailto:sarah.bowman@stockton.gov.uk)**