

CABINET - 3 DECEMBER 2003 PORTFOLIO : HEALTH AND SOCIAL INCLUSION

HEALTH BEST VALUE REVIEW

1. INTRODUCTION

1.1 This was the second cross-cutting review undertaken by the Council. The aim of the review was to look at the daily work that the Council carries out across all directorates and with partners to improve the health of local people. A key part of this work is carried out by Health Development based within the Environmental Health Service.

2. BACKGROUND

- 2.1 A Review Team was established and comprised: Annie Righton, Assistant Director (Environmental Health), Neil Frost, Health Policy Development Manager, Pam Coen, New Forest Primary Care Trust (NFPCT), Christine Stiling, NFPCT and Councillor Maureen Holding, Portfolio Holder for Health and Social Inclusion. The key outcomes of the review were anticipated to be:
 - A look at development and implementation of policy and strategy
 - · Effectiveness of partnership working
 - Co-ordination of action across the Council
 - Resource allocation to health development
- 2.2 Health was a core priority within the previous Council strategic document "Crossing the Bridge" and is also a Council aim in the current strategy, "The Heart of the Forest". Both have recognised the importance of health to the local community, Council and strategic partnerships with organisations such as the NFPCT.

3. NATIONAL DIRECTION FOR HEALTH

- 3.1 There has been an increasing realisation both among governments and health professionals that there needs to be a shift in emphasis from the purely medical model of health to a more inclusive social and community-based model as largely practised by local government. This approach has been central to the Best Value Review that has taken place.
- 3.2 Key to this change in direction was the Health Act 1999 which paved the way for a significant change to the relationship between the NHS and local government. Most importantly, legal requirements were introduced for both organisations to work together to improve the health of local people, a good example of which has been the Health Strategy recently brought before Cabinet.

4. FIVE-YEAR IMPROVEMENT PLAN

- 4.1# The Improvement Plan for Health Development is at Appendix 1. However, some of the more significant findings reveal that:
 - We are doing as well as, if not better than many other comparable Councils.
 - Community participation/involvement needs improvement and co-ordination, especially with partner agencies.
 - There is a need to consider how community development work such as Participatory Needs Assessment is to be continued and developed.
 - Partnership working on health is very good and the Council is thought of highly for its work by our partners, but work will need to continue to ensure partnerships remain good.
 - One area of particular concern was the 'hard to reach' groups. There
 was very little consensus amongst Council Members, staff and partner
 agencies about such groups, particularly who they might be and what
 their needs are. This is an area where further work is needed.
 - For the future, the issue of resource allocation will need to be considered, particularly in a partnership context with the development of such things as pooled or joint budgets and posts.

5. ENVIRONMENTAL IMPLICATIONS

5.1 Health and the Environment are closely linked, as the effects of a poor environment leads to poorer health. It is difficult to conceive that any issue which improves health could do anything detrimental to the environment.

6. CRIME AND DISORDER IMPLICATIONS

6.1 Again, Health and Crime and Disorder are closely linked in both physical and psychological aspects. As before, it is difficult to conceive that any issue which improves health could have a detrimental effect on crime and disorder issues.

7. FINANCIAL IMPLICATIONS

7.1 Increasingly, health development and improvement is carried out in partnership with other organisations, especially New Forest Primary Care Trust. Levels of resources will need to be considered when specific bids are required, which will be through relevant expenditure rounds. Joint bids with partner organisations will also need to be a part of the process.

8. PORTFOLIO HOLDER COMMENTS

8.1 The Portfolio Holder fully supports the Best Value Health Review and the Improvement Plan.

9. **RECOMMENDATIONS**

9.1 It is recommended that the Cabinet approve the 5-Year Improvement Plan subject to budgetary considerations .

For Further Information Contact:

Neil Frost

Health Policy Development Manager

Tel: 023 8028 5217 Fax: 023 8028 5596

Email: neil.frost@nfdc.gov.uk

Annie Righton

Assistant Director (Environmental Health)

Tel: 023 8028 5123 Fax: 023 8028 5596

Email: annie.righton@nfdc.gov.uk

5 YEAR IMPROVEMENT PLAN FOR HEALTH DEVELOPMENT

Local Health Economy

REPORT	IMPROVEMENT	PERFORMANCE	MILESTONE	RESPONSIBILITY	RESOURCES
REFERENCE	PROPOSED	MEASURE	DATE		
10.8	Environmental Health Service Plan to link with the Business Plan of the NFPCT Public Health Team	Each service/business plan referenced in the other	March 2005	Annie Righton and Bob Coates	

National Direction for Health

REPORT REFERENCE	IMPROVEMENT PROPOSED	PERFORMANCE MEASURE	MILESTONE DATE	RESPONSIBILITY	RESOURCES
11.7	a) Health to be included in the Community Plan, linked to the partnership Health Strategy	Health included in the Community Plan	March 2004	Keith Smith, Bob Coates, Annie Righton, Neil Frost	
11.8.4	Monitor the development of health scrutiny and take appropriate action when necessary	Health scrutiny system in place for NFDC	March 2005	Rosemary Rutins, Neil Frost	

5 YEAR IMPROVEMENT PLAN FOR HEALTH DEVELOPMENT

National Priorities and Local and Partnership Priorities

REPORT	IMPROVEMENT	PERFORMANCE	MILESTONE	RESPONSIBILITY	RESOURCES
REFERENCE	PROPOSED	MEASURE	DATE		
12.15.3 and	The Council and health	Health Strategy	March 2004	Portfolio Holder for	
13.7	partners to adopt the	adopted		Health, Bob	
	New Forest Health			Coates, Annie	
	Strategy			Righton, Neil Frost,	
				Health Strategy	
				Steering Group	

5 YEAR IMPROVEMENT PLAN FOR HEALTH DEVELOPMENT

Consultation

REPORT REFERENCE	IMPROVEMENT PROPOSED	PERFORMANCE MEASURE	MILESTONE DATE	RESPONSIBILITY	RESOURCES
14.10, 14.13, 14.14.5.6 & 14.15.6.8	Review with partners and NFDC joint work in community involvement	Review carried out and mechanism agreed	March 2005	Community Action Team, Local Strategic Partnership and Health Strategy Steering Group	
14.12	a) Regular reports on PNA taken to the LSP and partner agencies	a) Reports produced	a) March 2004	Neil Frost & PNA Steering group	
	b) PNA is taken to other communities across the New Forest	b) PNA process commences in new areas	b) March 2004		
14.14.2 & 14.15.6.8	Partnership event to be held to explore past and future work	Test partners on position on Partnership continuum	March 2004, 2005, 2006, 2007,	Health Strategy Steering Group, PH Group, NFDC Health Group	
14.14.4	Consider with Portfolio Holder for Health future financial and staff resource implications for health development	Increased resources	March 2005/6	Portfolio Holder for Health, Annie Righton	

5 YEAR IMPROVEMENT PLAN FOR HEALTH DEVELOPMENT

Hard to Reach Groups

REPORT	IMPROVEMENT	PERFORMANCE	MILESTONE	RESPONSIBILITY	RESOURCES
REFERENCE	PROPOSED	MEASURE	DATE		
16.13	Review with partners	Action Plan	March 2005	Health Strategy	
	and NFDC what is			Steering Group,	
	meant by hard to reach			Public Health	
	groups and formulate			Group, NFDC	
	action			Health Group	

Compare

REPORT REFERENCE	IMPROVEMENT PROPOSED	PERFORMANCE MEASURE	MILESTONE DATE	RESPONSIBILITY	RESOURCES
19.6.3	a) The adoption by the Council and partners of the New Forest Health Strategy	a) Adoption of strategy	a) September 2003	a) Portfolio Holder for Health, Annie Righton, Neil Frost, Bob Coates, Health Strategy Steering Group	
	b) Creation of joint budgets	b) Joint partnership budget(s)	b) March 2006	b) Portfolio Holder for Health, Annie Righton, Bob Coates	
19.7.17	Consider with Portfolio Holder for Health future financial and staff resource implications for health development	Increased resources	March 2005/6	Portfolio Holder for Health, Annie Righton	

5 YEAR IMPROVEMENT PLAN FOR HEALTH DEVELOPMENT

Challenge

REPORT REFERENCE	IMPROVEMENT PROPOSED	PERFORMANCE MEASURE	MILESTONE DATE	RESPONSIBILITY	RESOURCES
20.9	Introduction of performance measures for partnership work on health	Adoption of performance measures	March 2005	Health Strategy Steering Group, PH Group, NFDC Health Group	