Briefing

Briefing on Health and Wellbeing Boards in Yorkshire and Humberside

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1.0 Introduction

The Health and Social Care Act establishes Health and Wellbeing Boards (HWBs) to provide local oversight over commissioning of services. This document summarises progress made in Yorkshire and Humberside -

- Board status and membership
- Focus of activity
- Contact details.

Before we look at each Board in turn, we introduce the Health and Social Care Act, and what it means for housing providers.

2.0 The changing policy landscape

This section has two key elements:

- We look at the Health and Social Care Act itself
- We then look at the implications of the Act for housing providers.

2.1 The Health and Social Care Act

The Health and Social Care Act received royal assent at the end of March 2012. The scope and scale of the Health and Social Care Act led health think tank the King's Fund to describe it as 'the biggest shake-up of the NHS since it was established'.

The Act establishes HWBs to provide local oversight over commissioning of services. HWBs should bring together the main interests and services in the local area that affect health and wellbeing. They will provide a forum and space to bring a co-ordinated approach to healthcare and health improvement. The aspiration of the Act is for boards to drive quicker and clearer integration of services by bringing together heads of service areas in the local authority that have an interest in improving health outcomes and reducing health inequalities. Boards should maximise the impact of local investment in health by delivering a co-ordinated approach to health improvement across the NHS, social care and public health.

Formally, HWBs will be committees of local authorities, but membership can be expanded across health, care and health-related services. The Act specifies a minimum membership for Boards of:

- A local councillor
- A representative of the local HealthWatch
- A representative from the clinical commissioning group
- The director for adult social services
- The director for children's services
- The director for Public Health.

The Act is clear that this membership is the minimum required. HWBs are free to extend membership to include additional service area expertise, perspectives and representatives. Over and above the minimum membership criteria, the boards have a duty to take into account the needs of all local people. Housing is highlighted by the Department of Health (in their draft guidance for HWBs) as an example of an important social determinant of health that local boards may want to include in their membership.

2.2 The role of housing

We believe ensuring a voice and role for housing through the Board is an important way of ensuring the boards and transform local services. However, there are other opportunities to contribute to local priority setting and service design.

While involvement of housing on boards is important for genuine integration and transformation to take place, full membership of the Board is just one route to getting the voice of housing recognised. A local Board with a
wide and diverse membership will not automatically be more effective at joining-up services and driving better commissioning and outcomes than a Board with a tighter or closed membership that brings in specific contributions from housing on themes, services or pathways. As structures and ways of working are emerging now, it is too early to identify the most effective ways of running boards as these. The Federation will seek to share promising practice with its members as this develops. At this stage we can identify a variety of different approaches being taken. This includes:

- **Narrow and focused boards**: led by local authorities, with a core group of key commissioners from the local authority to work with Clinical Commissioning Groups (CCGs) and agree major priorities to drive commissioning strategies of different services.
- **Wider membership** convened along the lines of previous Local Strategic Partnership (LSP) working, with voices from local authority and wider independent sector.
- **A core-and-periphery approach**: with a closed core membership that acts as a decision-making group, supported by a broader panel or sounding Board of local expertise from across different service areas.

In order to find out more about the Act and the implications for housing or to find out more about the new structures including CCGs please download our full briefing at [http://bit.ly/OCw9Z4](http://bit.ly/OCw9Z4).

### 3.0 Background information

This document is the result of extensive desk-based research, looking at a range of websites (including HWB websites themselves, local authority websites and those of other local partners).

Two sources have been useful starting points for the creation of this document:

- The King’s Fund has created an interactive HWB directory¹.
- Calderdale Forward have produced a document² which summarises main contacts, membership (limited to roles rather than individuals), and Board update.

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4.0 Barnsley

4.1 Status and membership
According to the Calderdale Forward document (March 2012 update)\(^3\), the Board consists of:

- Council leader (chair)
- Two elected members
- Chief Executive
- Directors of Adult and Children’s Services
- Director of Public Health
- 2x CCG Representatives (currently 2 GP reps pending CCG being set up)
- LINks rep (pending establishment of HealthWatch)
- NHS Commissioning Board rep
- NHS Barnsley
- South West Yorkshire Partnership Foundation NHS Trust (PCT provider)
- Barnsley Hospital Foundation NHS Trust

4.2 Focus of activity
The Joint Strategic Needs Assessment (JSNA) is in its third iteration. The most recent JSNA (dated 2011, published November 2010\(^4\)) contains a range of data looking at the following themes:

- The place that you live:
  - Demography
  - Deprivation, economy and poverty
  - Child poverty
  - Education
  - Housing
  - Crime

- Lifestyle risk factors: the lives people lead:
  - Smoking/tobacco
  - Diet/nutrition
  - Alcohol
  - Drug misuse
  - Physical activity
  - Sexual health

- The services that people use:
  - Life expectancy
  - Vascular disease
  - Cancer
  - Physical and sensory impairment
  - Mental health
  - Learning disabilities
  - Child health
  - Children in need
  - Older people


No evidence has been uncovered of Barnsley’s Health and Wellbeing Strategy (HWS), though the NHS in Barnsley published a “Single Integrated Plan” for 2011/12-2014/15.

4.3 Contact details
The Calderdale Forward document lists Martin Farran and Ian Turner as the key contacts for the Board:

- Martin Farran, Interim Director Of Adult Social Services, Tel: 01226 772301, martinfarran@barnsley.gov.uk, Westgateplaza One Po Box 609 Barnsley S70 9FH
- Ian Turner Assistant Director, Council Governance, Tel: 01226 773421.

Contacts for the 2011 JSNA are:

- Steve Turnbull – Assistant Director Public Health, NHS Barnsley, Stephen.turnbull@barnsleypct.nhs.uk
- Rebecca Sherry – Business Development and Innovation, NHS Barnsley, rebecca.sherry@barnsleypct.nhs.uk
- Liz Pitt – Central Research Team, Barnsley MBC, elizabethpitt@barnsley.gov.uk

5.0 Bradford

5.1 Status and membership

The agenda for the September 2012 meeting\(^6\) states the Board has the following membership:

- Councillor David Green (Chair) (Leader of Bradford Metropolitan District Council)
- Councillor Ralph Berry (Portfolio Holder for Children’s Services)
- Councillor Amir Hussain (Portfolio Holder for Social Care)
- Councillor Glen Miller (Bradford Metropolitan District Council)
- Councillor Alun Griffiths (Bradford Metropolitan District Council)
- Dr Andy Withers (Bradford District Clinical Commissioning Group)
- Dr Chris Harris (Bradford District Clinical Commissioning Group)
- Dr Philip Pue (Airedale, Wharfedale and Craven Clinical Commissioning Group)
- Dr Graeme Summers (Airedale, Wharfedale and Craven Clinical Commissioning Group)
- Dr Ishtiaq Gilkar (Bradford City Clinical Commissioning Group)
- Dr Akram Khan (Bradford City Clinical Commissioning Group)
- Tony Reeves (Chief Executive of Bradford Metropolitan District Council)
- John Lawlor (Chief Executive of the NHS Cluster)
- Linda Pollard (Chair of the NHS Cluster)
- Anita Parkin (Director of Public Health)
- Janice Simpson (Interim Strategic Director Designate of Adult Social Services)
- Kath Tunstall (Strategic Director of Children and Young People’s Services)
- Emmerson Walgrove (Bradford LINk)
- Natasha Thomas (Bradford Assembly representing the Voluntary and Community sector)

5.2 Focus of activity

The draft HWS (dated September 2012\(^7\)) includes a series of proposed priorities. These are:

1. Give every child the best start in life
   a. starting well
      i. Reduce child poverty
      ii. Reduce infant mortality
      iii. Promote effective parenting and early years development

2. Enable all children, young people and adults to maximise their capabilities and have control over their lives
   a. Developing well
      i. Ensuring young people are well prepared for adulthood and work, with focus on helping children with disabilities to maximise their capabilities
      ii. Reduce childhood obesity and increase levels of physical activity and healthy eating in children and young people
      iii. Improve oral health in the under 5s
   b. Living well
      i. Improve the mental health of people in Bradford
      ii. Supporting people with disabilities, sensory needs and long term conditions
   c. Ageing well
      i. Improve diagnosis and care for people with dementia and improve their, and their carers’, quality of life

\(^6\) [http://councilminutes.bradford.gov.uk/wps/PA_CommitteeMinutes/CallDisplayDocServlet?docID=9231](http://councilminutes.bradford.gov.uk/wps/PA_CommitteeMinutes/CallDisplayDocServlet?docID=9231)

\(^7\) [http://councilminutes.bradford.gov.uk/wps/PA_CommitteeMinutes/CallDisplayDocServlet?docID=9232](http://councilminutes.bradford.gov.uk/wps/PA_CommitteeMinutes/CallDisplayDocServlet?docID=9232)
ii. Promote the independence and wellbeing of older people

3. Create fair employment and good work for all
   a. Working well
      i. Increase employment opportunities and training
      ii. Promote healthier lifestyles in the workplace

4. Ensuring healthy standard living for all
   i. Create the economic, social and environmental conditions that improve quality of life for all

5. Create and develop healthy and sustainable places and communities
   i. Deliver a healthier and safer environment
   ii. Decent homes and affordable warmth
   iii. Enhance social capital and citizenship

6. Strengthen the role and impact of ill-health prevention
   i. Reduce harm from preventable disease caused by tobacco, obesity and alcohol
   ii. Reduce mortality from cardiovascular disease, respiratory disease and cancer

5.3 Contact details
The Calderdale Forward document lists Anita Parkin (Director of Public Health) and Adrian Tumber (adrian.tumber@bradford.gov.uk) as the key contacts for the Board.

The Board agenda contact is: Palbinder Sandhu, Tel: 01274 432269, Fax: 01274 728260, palbinder.sandhu@bradford.gov.uk

The HWS contact is listed as Julia Burrows, Tel: 01274 237695
6.0 Calderdale

6.1 Status and membership

According to the minutes of the October 2012 meeting, the Board consists of:

- Angela Monaghan Chair, NHS Calderdale, Kirklees and Wakefield District Cluster (Chair)
- Gordon Mitchell Interim Chief Executive, Calderdale MBC
- Cllr Janet Battye Deputy Leader, Calderdale MBC
- Cllr Bob Metcalfe Portfolio Holder, Adult Health and Social Care, Calderdale MBC
- Dr Graham Wardman Director of Public Health, NHS Calderdale and Calderdale MBC
- Dr Matt Walsh Designate Chief Officer, NHS Calderdale Clinical Commissioning Group
- Dr Steven Cleasby Clinical Vice Chair, NHS Calderdale Clinical Commissioning Group
- Cllr Ashley Evans Portfolio Holder, Education & Life Long Learning, Calderdale MBC
- Cllr Stephen Baines Leader of the Conservative Group, Calderdale MBC
- Stuart Smith Director of Children and Young People’s Services, Calderdale MBC
- Adrian Crawley Calderdale LINk
- Cllr Tim Swift Leader, Calderdale MBC
- Bev Maybury Director Adults, Health and Social Care, Calderdale MBC
- Sue Cannon Director of Quality and Engagement, NHS Calderdale, Kirklees and Wakefield District Cluster
- Cllr Megan Swift Portfolio Holder, Children's Social Care & Lead Member for Children's Services, Calderdale MBC
- Phil Shire Head of Wellbeing and Social Care, Adult Health and Social Care Calderdale MBC
  (Substitute for Bev Maybury)

6.2 Focus of activity

A stakeholder event was held in November 2011 to look at evidence of need including the JNSA, economy, child poverty and housing, and consider priorities for the Wellbeing Strategy. It was agreed that a narrow focus on health should be avoided. The “Evidence of Need Resource”, presented to the Calderdale Assembly in November 2011, summarises information from a number of existing sources:

- The Calderdale Needs Assessment 2011 – JSNA (Health Profile)
- The Calderdale Child Poverty Needs Assessment (Child Poverty Profile) – in November 2011 this was still in draft form and was due to be consulted on
- Safer and Stronger Strategic Assessment 2010 (Safer and Stronger Profile) – the 2011 assessment was due to be completed
- Calderdale’s Local Economic Assessment 2011 (Economic Profile)
- Strategic Housing Market Assessment 2011 (Housing Profile).

The Health Profile contains a range of data and analysis around five key areas:

- Children and young people
- Cancer and cardiovascular disease
- Lifestyle choices
- Health inequalities
- Ageing population.

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The HWS is currently in draft form for approval; details of the draft can be found in the papers for the October 2012 meeting\textsuperscript{10}. It runs from 2012 to 2022. The strategy sets out six outcomes, recognising that Calderdale should be a place:

- Where people have good health
- With a balanced and dynamic local economy
- Where children and young people are ready for learning and ready for life
- Where fewer children under the age of 5 live in, and are born into, poverty
- Where older people live fulfilling and independent lives
- Where everyone has a sense of pride and belonging based on mutual respect

Under each of these outcomes the strategy contains information about:

- Why this is a priority for Calderdale
- What success will look like
- Measures of success
- The approach to tackling this outcome
- Commitments to action
- Calls to action.

6.3 **Contact details**

The Calderdale Forward document lists Alan Duncan and Sheron Hobson as the key contacts for the Board:

- Alan Duncan, Partnership Manager, 01422 392207, The Partnership Support Team, Town Hall, Crossley Street, Halifax, HX1 1UJ
- Sheron Hobson, Partnership Support Officer, 01422 393199, The Partnership Support Team, Town Hall, Crossley Street, Halifax, HX1 1UJ

7.0 Doncaster

7.1 Status and membership

Doncaster’s HWB website contains details of the Board’s membership:

- Chair - Portfolio Holder for Adult Social Care and Health - Cllr Patricia Schofield
- Vice Chair - Portfolio Holder for Children and Young People – Cllr Eric Tatton-Kelly
- Director of Adults and Communities - Joan Beck
- Director of Children and Young People’s Services - Chris Pratt
- Director of Public Health – Dr Tony Baxter
- Chair of Doncaster LINk – Sheila Barnes
- Chair of Doncaster Clinical Commissioning Group – Dr Nick Tupper
- Chief Operating Officer, NHS Doncaster – Chris Stainforth

7.2 Focus of activity

According to Doncaster’s HWB website, the HWS was due to be completed by summer 2012. The draft was out for consultation until September 2012. It contains outcomes, area of focus and proposed priorities for a number of overarching themes:

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Area of Focus</th>
<th>Proposed Priorities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy Places and Communities</td>
<td>Ensure Doncaster’s housing is healthy housing</td>
<td>Improve alignment of health and housing initiatives</td>
</tr>
<tr>
<td>I’m able to enjoy life</td>
<td>Ensure employment brings health benefits and that Doncaster people are healthy enough to benefit from new work opportunities</td>
<td>Establish effective links with work and skills partnership</td>
</tr>
<tr>
<td>I feel like part of a community and want to give something back</td>
<td>Health Protection and Emergency preparedness and response Make the best use of Doncaster’s physical assets</td>
<td>Ensure environment strategies and health protection strategies align</td>
</tr>
<tr>
<td>Health for All</td>
<td>Healthy mothers, healthy babies, healthy</td>
<td>Establish comprehensive starting and</td>
</tr>
<tr>
<td>I know what I can do to</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>keep myself healthy</th>
<th>children</th>
<th>developing well programmes to reduce infant mortality</th>
</tr>
</thead>
<tbody>
<tr>
<td>I understand my health so I can make good decisions</td>
<td>Promote positive behaviours and lifestyles</td>
<td>Increase physical activity and address poor nutrition to tackle obesity</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tobacco control policies to encourage a Smoke Free Doncaster</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Reduce the harmful effects of alcohol</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Improve the mental health of Doncaster</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tackling domestic violence and unintentional injuries</td>
</tr>
</tbody>
</table>

#### Keeping People Well for Longer

<table>
<thead>
<tr>
<th>I know how to help myself and who else can help me</th>
<th>Independent living</th>
<th>Support older people to live independently with dignity</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am supported to maintain my independence for as long as possible</td>
<td>Carers</td>
<td>Help people with long term limiting illness reach their full potential</td>
</tr>
<tr>
<td>I am in control of my care and support</td>
<td>Early identification and support</td>
<td>Ensure carers are supported and healthy</td>
</tr>
<tr>
<td>Those around me are supported well</td>
<td>Preventing early deaths and chronic diseases</td>
<td>Mainstream the use of risk prediction models</td>
</tr>
<tr>
<td></td>
<td>Re-ablement and recovery</td>
<td>Earlier diagnosis of cancer, vascular disease, diabetes and dementia</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Commission recovery pathways for people with cancer, substance misuse and mental health problems</td>
</tr>
</tbody>
</table>

#### Access to High Quality Care Services

<table>
<thead>
<tr>
<th>I get the treatment and care which are best for me and my life</th>
<th>Equal access to health and care services for all based on need</th>
<th>Develop a long term commissioning strategy for sustainable health care provision</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am treated with dignity and respect</td>
<td>Ensure a positive experience of care, caring and support</td>
<td>Work in partnership to commission integrated pathways of care that will achieve the best outcomes for the resource invested</td>
</tr>
<tr>
<td>I am happy with the quality of my care and support</td>
<td>Protect from avoidable harm and care in a safe environment</td>
<td>Agree annually an affordable operating plan that clearly demonstrates how quality will be improved year on year</td>
</tr>
<tr>
<td>I want to die well</td>
<td>Sexual health</td>
<td>End of Life Care</td>
</tr>
</tbody>
</table>
The most recent JSNA is dated 2010/11. This contains a range of data under the following themes:

- Living Well
- Starting Well: Early Years (0-4)
- Developing Well: School Years (5-19)
- Developing Well: Training (15-24)
- Working Well: Employment (25-64)
- Ageing Well: Retirement (65+)

Under each of these themes, a range of data and analysis is contained, which covers:

- Summary
- Demography
- Social and Environmental Context
- Lifestyle and risk factors
- Ill health and disability
- Signposts (to information sources, policy context and NICE guidance).

According to Doncaster’s HWB website, the JSNA is due to be refreshed.

7.3 Contact details

The Calderdale Forward document lists Tony Baxter, Director of Public Health, and Theo Jarratt as the key contacts for the Board:

- tony.baxter@doncasterpct.nhs.uk, Director of Public Health
- theo.jarratt@doncaster.gov.uk, Tel: 01302 737827, Doncaster Council, Floor 1, The Council House, College Road, Doncaster, DN1 3AJ

The address used for consultation responses on the HWS is: Public Health, NHS Doncaster, White Rose House, Ten Pound Walk, Doncaster, DN4 5DJ or email - louise.robson@doncasterpct.nhs.uk

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8.0 **East Riding**

8.1 **Status and membership**

According to the East Riding HWB website\(^\text{16}\), the Board consists of:

- Councillor Owen (Chair)
- Councillor Abraham
- Councillor R Burton
- Councillor Cracknell
- Councillor Harrap
- Dr Tim Allison - Director of Public Health
- Alison Michalska - Director of Children, Family and Adults Services
- Dr Gina Palumbo - Clinical Commissioning Group
- Jacqui Brayshaw - Local HealthWatch Representative
- Mr Jon Swift - Acting Chief Executive, NHSERY
- Dr Frank Thornton – Clinical Commissioning Group

8.2 **Focus of activity**

The HWS (undated)\(^\text{17}\) contains three long-term outcomes for health and wellbeing:

- East Riding residents achieve healthy, independent ageing
- Health inequalities in the East Riding are reduced
- Children and young people in the East Riding enjoy good health and wellbeing.

The strategy notes that the 2011/12 JSNA would provide further information and focus on two key strategic health and care areas:

- Supporting local residents to age independently
- Understanding the mental health needs of young people

Analysis of data has also revealed three major challenges that cut across all health and wellbeing issues:

- The changing needs and demands of an ageing population
- The existence of health inequalities from birth to death
- The economic necessity of preventing poor health

Three strategic questions for health and social care were asked:

- What will be the impact of the changing age profile across the East Riding?
- Will health and social care need increase in all parts of the East Riding?
- How can East Riding residents be better supported to live independently with a high quality of life?

8.3 **Contact details**

The Calderdale Forward document lists Ann Woodward and Dave Pinder as key contacts for this Board:

- Head of Performance and Strategic Partnerships Ann Woodward Tel: 01482 391420, email: ann.woodward@eastriding.gov.uk
- David Pinder, 01482. 392510, email dave.pinder@eastriding.gov.uk

An additional contact is Jane Stewart, Overview and Scrutiny Team Leader, email: jane.stewart@eastriding.gov.uk, Tel: 01482 393204, East Riding of Yorkshire Council, Democratic Services, Overview and Scrutiny, County Hall, Beverley, HU17 9BA.

\(^{16}\) [http://www2.eastriding.gov.uk/council/committees/health-and-wellbeing-Board/](http://www2.eastriding.gov.uk/council/committees/health-and-wellbeing-Board/)

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10.0 Hull

10.1 Status and membership
According to the minutes of the April 2012 meeting\(^\text{18}\), the Board consists of:

- Councillor Rilba Jones, Portfolio Holder for Health and Adult Services (chair)
- Elected Councillors (Councillor Stephen Brady, Councillor Simone Butterworth, Councillor Rosemary Pantelakis, Councillor Gary Wareing)
- Angela Dunn, Head of Adult Services for the Local Authority
- John Readman, Director of Children’s Services for the Local Authority
- Dr Wendy Richardson, Director of Public Health
- Jason Stamp, representative of the Local LINk (HealthWatch once established)
- Dr Tony Banerjee, chair of the CCG
- Kath Lavery, vice chair of the CCG
- Dr Dan Roper, CCG
- Andrew Burnell, Chief Executive, City Health Care Partnership (Advisor)
- David Snowden, Chief Executive, Humber Foundation Trust (Advisor)
- Yvette Oade, Executive Medical Director, Hull & East Yorkshire NHS Trust (Advisor)
- Emma Latimer, Interim Accountable Officer, Hull Clinical Commissioning Group (Advisor)

10.2 Focus of activity
The latest JSNA is dated 2011\(^\text{19}\). A summary of the document\(^\text{20}\) shows that the core focus of the JSNA is on:

- Healthy lifestyles
- Coronary heart disease
- Stroke
- Chronic obstructive pulmonary disease
- Diabetes
- Cancer
- Mental health
- Children and young people
- Primary and community care
- End of life care
- Sexual health
- Substance misuse
- Urgent care
- Older people

For each of these, the JSNA highlights:

- What is needed
- The core strategy (commissioning response to the need)
- Outcomes (evaluation and JSNA)

According to the Hull council website\(^\text{21}\), the HWS is still to be produced.


\(^\text{19}\) http://jsnaonline.org/

10.3 **Contact details**

The Calderdale Forward document lists Angela Dunn and Alex Holgate as key contacts for this Board:

- Angela Dunn, Director Of Adult Services, 01482 616312, [angela.dunn@hullcc.gov.uk](mailto:angela.dunn@hullcc.gov.uk), Brunswick House, Strand Close, Beverley Road, Hull, HU2 9DB

An additional contact is the Partnership Team, Hull City Council, Guildhall, Alfred Gelder Street, Hull, HU1 2AA, Tel: 01482 300 300, Text phone: 01482 300 349, Email: [partnershipteam@hullcc.gov.uk](mailto:partnershipteam@hullcc.gov.uk)

21 [http://www.hullcc.gov.uk/portal/page?_pageid=221.692937&_dad=portal&_schema=PORTAL](http://www.hullcc.gov.uk/portal/page?_pageid=221.692937&_dad=portal&_schema=PORTAL)
11.0 Kirklees

11.1 Status and membership

According to the Kirklees Partnership website\(^2\), the Board consists of:

- Bob Carter, Warm Zones Limited
- Terry Dutchburn, South West Yorkshire Mental Health Trust
- Stephen Fealy, West Yorkshire Fire and Rescue Authority
- Tony Gerrard, NHS Kirklees (Joint Chair AHC LPSB)
- Lesley Hill, Calderdale and Huddersfield NHS Trust
- Chris Lawton, Voluntary Action Network
- Cllr Vivien Lees-Hamilton, Kirklees Council
- Victoria Mager, Agency Manager - Anchor Staying Put Kirklees (Reserve Board member for AHC LPSB)
- Merran McRae, Kirklees Council
- David Morby, Kirklees Council
- Cllr Adrian Murphy, Kirklees Council
- Simon Perfitt, Voluntary Action Network
- Cllr Kath Pinnock, Kirklees Council
- Mike Potts, NHS Kirklees
- Dawn Stephenson, Mid Yorkshire NHS Trust
- Cllr Molly Walton, Cabinet Member for Kirklees Council (Joint Chair AHC LPSB)

Support officers are listed as:

- Cllr Jean Calvert, Kirklees Council
- Judith Hooper, Director of Public Health
- Phil Longworth, Kirklees Council
- Carol McKenna, NHS Kirklees
- Lyz McKenna, Voluntary Action Network
- Rebecca Morrison, Kirklees Partnership
- Keith Smith, Kirklees Council

11.2 Focus of activity

The HWS\(^3\) states its vision as: “No matter where they live, people in Kirklees live their lives confidently, in better health, for longer and experience less inequality.” The document lists a number of long term outcomes:

- Children having the best possible start in life from conception, so breaking the link between early disadvantage and poor outcomes throughout life
- Kirklees is a place where more people, particularly the economically vulnerable, reach their potential, work productively and creatively
- People having a sense of safety and identity and being at ease with each other
- Increased skills and capacity in communities generates energy for change
- More older people feel healthy, active and included
- Threats to public health are minimised and dealt with speedily
- The level of support available to individuals, families and communities reflects their level of need
- Inequalities in health and wellbeing reducing across Kirklees and against national outcomes


\(^3\) [http://www.kirkleespartnership.org/publications/fileview.asp?fileRef=f51b936fa19dfe691bb61c8f63059e39](http://www.kirkleespartnership.org/publications/fileview.asp?fileRef=f51b936fa19dfe691bb61c8f63059e39)
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It also states that residents should have a sense of good health and wellbeing by:

- Having the aspiration and ability to take control of their lives, so they enjoy life and flourish – by feeling involved, supported, confident and more resilient.
- Having the opportunity to make the most of their talents, skills and qualities to fulfil their potential
- Having a suitable job, if at working age
- Having a decent home that is warm and meets their needs
- Minimising the impact of their vulnerabilities
- Being able to take part in the design and delivery of services that are suitable to their needs.

The latest published JSNA is from 2010\(^2\). It contains a range of analysis which is both geographic (providing profiles for local areas within Kirklees) and thematic. It describes the needs of the area in terms of:

- Vulnerable groups
  - Disabled children
  - Looked after children
  - Young people not in education, employment or training
  - Women of childbearing age
  - Adults with physical disability and/or sensory impairment
  - Adults with learning disabilities
  - Asylum seekers
  - Offenders
  - Older people
  - Carers
  - Safeguarding children and vulnerable adults
- Specific conditions
  - Asthma
  - Cancer
  - Cardiovascular disease
  - Children dying before their first birthday
  - Chronic kidney disease
  - Chronic long term pain
  - Chronic obstructive pulmonary disease
  - Dementia
  - Diabetes
  - Infectious disease and HIV
  - Mental health and emotional wellbeing
  - Neurological conditions
  - Obesity
  - Sexually transmitted infections and sexual health
- Behaviours
  - Alcohol
  - Breastfeeding
  - Drug misuse
  - Food and nutrition
  - Physical activity
  - Sexual behaviour and teenage pregnancy
  - Smoking and tobacco use
- Wider factors affecting health and wellbeing
  - Accidents

11.3 Contact details

The main contact for this Board is Lead Director Merran McRae, Director of Wellbeing and Communities:

- Director for Well-being and Communities, Merran McRae, Civic Centre 3, Market Street, Huddersfield HD1 2YZ, merran.mcrae@kirklees.gov.uk.

An additional contact is Rebecca.morrison@kirklees.gov.uk
12.0 Leeds

12.1 Status and membership

The Leeds HWB website lists the following as comprising its membership:

- Cllr Lisa Mulherin, Executive Member for Health & Wellbeing, Leeds City Council (chair)
- Cllr Judith Blake, Executive Member for Children’s Services, Leeds City Council
- Cllr Stewart Golton, Leader of the Liberal Democrat Party, Leeds City Council
- Cllr Graham Latty, Health and Wellbeing Lead, Conservative Party, Leeds City Council
- Cllr Lucinda Yeadon, Executive Member for Adult Health and Social Care, Leeds City Council
- Dr Jason Broch, Leeds North Clinical Commissioning Group
- Ms Susie Brown, Third Sector Leeds
- Dr Ian Cameron, Director of Public Health, NHS Leeds / Leeds City Council
- Dr Andy Harris, Leeds South and East Clinical Commissioning Group
- Mr John Lawlor, Chief Executive, NHS Airedale, Bradford and Leeds
- Ms Pat Newdall, Leeds Local Involvement Network
- Dr Gordon Sinclair, Leeds West Clinical Commissioning Group

Officers in attendance include:

- Ms Sandie Keene, Director of Adult Social Services, Leeds City Council
- Mr Nigel Richardson, Director of Children’s Services, Leeds City Council.

12.2 Focus of activity

A presentation available from the Leeds Initiative website contains summaries of both the HWS and the JSNA.

In terms of the current priorities informing the HWS, the presentation lists the following:

- Help protect people from the harmful effects of tobacco
- Support more people to live safely in their own homes
- Give people choice and control over their health and social care
- Make sure that people who are the poorest improve their health fastest

Approval for the HWS was due in September/October 2012, and the strategy is due to be launched in December 2012.

The presentation also includes key issues from the JSNA:

- The inequalities gap
- Demographic changes
- Lifestyle influences
- Specific conditions – including cancer mortality, CHD prevalence, diabetes prevalence, COPD and hypertension
- Children – child poverty, teenage pregnancy, alcohol hospital admissions, illegal drug use, youth offending, infant mortality, obesity, oral health, immunisation
- Refugees and asylum seekers

http://www.leedsinitiative.org/healthy/page.aspx?id=21346
http://www.google.co.uk/url?sa=t&rct=j&q=leeds%20%22health%20and%20wellbeing%20strategy%22&source=web&cd=2&cad=rja&ved=0CCQQFjAB&url=http%3A%2F%2Fwww.leedsinitiative.org%2FWorkArea%2Flinkit.aspx%3FLinkIdentifi er%3Did%26ItemID%3D21626%26libID%3D21599&ei=esSTUK23CcWR0QX9kHgDw&usg=AFQjCNFaNrXqHNVh0ISy ahN_vyErKOa_cg
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- Wider determinants
- Service utilisation

The detail within the JSNA is contained on the Leeds Initiative website27. The summary document is structured as follows:
- Cross cutting issues for Leeds – deprivation, mental health
- Population
- Behaviours
- Specific health conditions
- Children and young people
- Wider factors – the economic downturn, financial inclusion, housing, social isolation and older people
- Key populations and equality groups
- Use of services
- Localities
- Recommendations for future work streams.

12.3 **Contact details**

The Calderdale Forward document lists Sandie Keene and Rob Kenyon as the main contacts for this Board:
- Ms Sandie Keene, Director Of Adult Social Services, 0113 247 541, sandie.keene@leeds.gov.uk, Merrion House, Merrion Centre, Leeds, LS2 8DT.

The HWB postal address is Leeds Initiative, Civic Hall, Leeds, LS1 3DL, Tel: 0113 224 3057, email: Christine.farrar@leeds.gov.uk

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27 [http://www.leedsinitiative.org/JSNA/]
13.0 **North East Lincs**

13.1 **Status and membership**

According to the Calderdale Forward summary\(^{28}\), the Board is comprised of the following:

- Elected members \(\times 3\)
- Portfolio Holder for Health, Wellbeing, Tourism and Culture (NELC)
- Portfolio Holder for People Services (NELC)
- Leader of the Council and Portfolio Holder for Finance and Regeneration (NELC)
- Chief Executive (NELC)
- Strategic Director of Governance and Transformation (NELC)
- Strategic Director of People and Communities (NELC)
- Chief Operating Officer/Director of Finance (CTP)
- Director of Integrated Commissioning (CTP)
- Acting Director of Public Health (NELC/CTP)
- GPCC Programme Director/ Director of Contracting (CTP)
- Chief Officer (VANEL)
- Shadow Accountable Officer (CTP)
- General Practitioner
- Chairman (CTP)

13.2 **Focus of activity**

The latest JSNA (dated 2011)\(^{29}\) covers a large range of indicators, data and analysis that sits within five themes:

- Population
- Social and environmental wellbeing
- Lifestyle
- Health and wellbeing
- Service use.

The document is a summary of a live dataset, which is hosted on the North East Lincolnshire Informed website\(^{30}\).

A September 2012 document notes that the first draft of the HWS was shared with the Board, and subsequent to this a series of stakeholder engagement events will be held. The document notes that there are four themes in the strategy that will be tested in the consultations:

- Tackling poverty and inequality – reducing poverty and creating opportunities
- Individual and community involvement (resilience) – communities at the heart of health and wellbeing
- Make lifestyles easier (prevention and intervention) – healthier lifestyles
- Accessible and effective support services (high quality care)

A second document (“HWB Strategy Appendix”\(^{31}\)) lists a number of key groups/areas for focus:

- Women’s health
- Children and young people
- Older people

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\(^{30}\) [http://www.nelincsdata.net/ias/](http://www.nelincsdata.net/ias/)

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- Deaths
- Health and wellbeing
- Vulnerable groups
- Disability
- Social and environmental wellbeing
- Local participation
- Education
- Housing
- Crime and disorder
- Healthy weight
- Smoking
- Alcohol
- Drug misuse
- Health care
- Clinical issues
- Mental health.

13.3 Contact details
The Calderdale Forward document lists Jack Blackmore as the main contact:

- Jack Blackmore, Strategic Director of People and Communities, Municipal Offices, Grimsby, North East Lincolnshire, DN31 1HU, Tel: 01472 323026, jack.blackmore@nelincs.gov.uk
14.0 North Lincolnshire

14.1 Status and membership
According to the Calderdale Forward summary\textsuperscript{32}, the Board is comprised of the following:

- Elected members x 2:
  - Chair - Cabinet Member for Adults and Children's Services and Health & Wellbeing.
  - Lead Member
- Lead for Health & Wellbeing
- Director of Adult Social Services
- Director of Children's Services
- Director of Public Health
- Chair of North Lincolnshire CCG
- Chair of LINks (North Lincolnshire) transition to HealthWatch
- Chief Executive of North Lincolnshire PCT & Acting Chief Officer for North Lincolnshire CCG.

14.2 Focus of activity
The North Lincolnshire NHS website\textsuperscript{33} lists two documents for 2012 – a JSNA Consultation Report, and an agency response to the consultation. The latest full JSNA is therefore from 2010. The JSNA covers a range of data and analysis relating to:

- Demographic issues
- Wider determinants of health
- Measures of health and wellbeing
- Lifestyle behaviours
- Inequalities in health
- Vulnerable adults
- Children and young people
- Patterns of disease and ill-health
- Mortality trends
- Access to health and social care
- Patterns of expenditure
- User voice
- Locality focus

There has been no information found relating to the HWS.

14.3 Contact details
The Calderdale Forward document lists Mike Briggs as the main contact:

- Mike Briggs, Adult Social Services, Tel: 01724 296403, Email: mike.briggs@northlincs.gov.uk

\textsuperscript{33} http://www.northlincolnshire.nhs.uk/healthintelligence/jsna/
15.0 **North Yorkshire**

15.1 **Status and membership**

According to the Board’s website\(^{34}\), the Board has the following membership (correct as of April 2012):

- Cllr John Weighell (chair)
- Cllr John Blackie (Richmondshire District Council representative)
- Janet Waggot (Chief Executive, Ryedale District Council representative)
- Cllr Clare Wood (portfolio holder for health and adult services)
- Cllr Car Les (portfolio holder for children and young people’s services)
- Richard Flinton (chief executive, North Yorkshire County Council, County Council officer)
- Cynthia Welbourn (corporate director for children and young people’s services, North Yorkshire County Council, County Council officer)
- Helen Taylor (corporate director for health and adult services, North Yorkshire County Council, County Council officer)
- Janet Kirk (chair of the physical and sensory impairment partnership Board, Healthwatch representative)
- Kate Tayler (North Yorkshire and York forum, Voluntary sector representative)
- Dr Vicky Pleydell (Hambleton, Richmondshire and Whitby CCG)
- Dr Mark Hayes (Vale of York CCG)
- Dr Colin Renwick (Airedale, Wharfdale and Craven CCG)
- Dr Alistair Ingram (Harrogate and Rural District CCG)
- Dr Phil Garnett (Scarborough and Ryedale CCG)
- Dr Philip Kirby (Director of Public Health, NHS NY&Y interim director of public health)
- Sue Metcalfe (NHS NY&Y chief executive and Chief executive of NHS cluster)
- Seamus Breen (Board support)

15.2 **Focus of activity**

The JSNA\(^{35}\) is focused geographically rather than thematically, containing analysis and data for the following areas:

- North Yorkshire
- Craven district
- Harrogate district
- Richmondshire district
- Ryedale district
- Scarborough district
- Selby district
- Hambleton, Richmondshire & Whitby CCG
- Hambleton and Rydale element of the Vale of York CCG
- Harrogate and Rural District CCG
- Scarborough and Ryedale CCG

There are also thematic summaries:

<table>
<thead>
<tr>
<th>Give every child the best start in life</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child poverty</td>
</tr>
</tbody>
</table>

\(^{35}\) [http://www.northyorks.gov.uk/jsna](http://www.northyorks.gov.uk/jsna)
<table>
<thead>
<tr>
<th>Keeping children safe and protected from harm</th>
<th>Enable all children, young people and adults to maximise their capabilities and have control over their lives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domestic abuse</td>
<td>Education and skills</td>
</tr>
<tr>
<td>Adult safeguarding</td>
<td>Teenage pregnancy</td>
</tr>
<tr>
<td>Create fair employment and good work for all</td>
<td>Economy and employment</td>
</tr>
<tr>
<td>Ensure a healthy standard of living for all</td>
<td>Affordable warmth</td>
</tr>
<tr>
<td>Create and develop health and sustainable places and communities</td>
<td></td>
</tr>
<tr>
<td>Crime and anti-social behaviour</td>
<td>Environment</td>
</tr>
<tr>
<td>Housing</td>
<td>Social isolation</td>
</tr>
<tr>
<td>Strengthen the role and impact of ill-health prevention</td>
<td></td>
</tr>
<tr>
<td>Alcohol</td>
<td>Communicable diseases</td>
</tr>
<tr>
<td>Drug misuse</td>
<td>Falls</td>
</tr>
<tr>
<td>Mental Health and emotional wellbeing</td>
<td>Immunisations</td>
</tr>
<tr>
<td>Obesity and Healthy Eating – Adults</td>
<td>Obesity and Healthy Eating</td>
</tr>
<tr>
<td>Physical activity – Adult</td>
<td>Physical activity</td>
</tr>
<tr>
<td>Road Traffic Collisions</td>
<td>Screening</td>
</tr>
<tr>
<td>Sexual health</td>
<td>Smoking</td>
</tr>
<tr>
<td>Maximise the effectiveness of condition or treatment pathways</td>
<td></td>
</tr>
<tr>
<td>Cancer</td>
<td>Chronic obstructive pulmonary disease</td>
</tr>
<tr>
<td>Dementia</td>
<td>Diabetes</td>
</tr>
<tr>
<td>End of life care</td>
<td>Long-term neurological conditions</td>
</tr>
<tr>
<td>Service utilisation – health and adult services</td>
<td>Service utilisation – healthcare</td>
</tr>
<tr>
<td>Cardiovascular health</td>
<td></td>
</tr>
<tr>
<td>• Atrial fibrillation</td>
<td></td>
</tr>
<tr>
<td>• Heart failure</td>
<td></td>
</tr>
<tr>
<td>• Stroke</td>
<td></td>
</tr>
<tr>
<td>Population groups with specific health needs</td>
<td></td>
</tr>
<tr>
<td>Autism</td>
<td>Black, Asian, minority ethnic groups, migrants, refugees and asylum seekers</td>
</tr>
<tr>
<td>Carers</td>
<td>Gypsy, Roma, Traveller and Show people populations</td>
</tr>
<tr>
<td>Homeless</td>
<td>Looked after children and those leaving care</td>
</tr>
<tr>
<td>People with learning disabilities and difficulties</td>
<td>Lesbian, gay, bisexual and transgender communities</td>
</tr>
<tr>
<td>Offenders</td>
<td>Older people</td>
</tr>
<tr>
<td>People with physical or sensory impairment</td>
<td>Service personnel and their families</td>
</tr>
</tbody>
</table>
The summary document\textsuperscript{36} recognises a number of key issues for North Yorkshire:

- It has an ageing population (with implications for rising numbers/prevalence of certain conditions such as dementia, stroke, obesity, diabetes)
- Cancers and circulatory disease account for the most deaths
- Access to services, service availability and social isolation are issues
- Certain groups experience different levels of health to the rest of the population
- There are challenges across every stage of the life course including child poverty, inequitable educational attainment, fuel poverty and social isolation
- Health inequalities exist at local levels and at North Yorkshire level.

The HWS was out for consultation in September 2012 and will be brought for approval to the Board during November 2012. The draft document\textsuperscript{37} lists the Board’s vision as being “People in all communities in North Yorkshire have equal opportunities to live long healthy lives”. It raises a series of challenges, strategic principles and priorities:

- **Challenges**
  - The increasing care needs of a rapidly growing population of older people
  - The health inequalities within North Yorkshire and within each district
  - North Yorkshire’s “killer” diseases
  - The unsustainability of the current service model in North Yorkshire

- **Strategic principles**
  - Use the advantages obtainable from partnership working
  - Identify, support and encourage community assets
  - Develop community based prevention and reablement service – prevention is better than cure
  - Maximise health gain from other strategies which affect the wider determinants of health
  - Develop cost-effective solutions informed by the evidence base

- **The priorities**
  - Ensure every child has the best start in life
  - Strengthen the role and impact of ill health prevention and encourage healthy lifestyles and behaviours
  - Improve emotional health and wellbeing
  - Enable older people to be safe, independent and well
  - Create and develop healthy sustainable places and communities in which people can flourish

15.3 **Contact details**

For more information on the HWB, please contact Seamus Breen, assistant director - health reform and development by e-mailing seamus.breen@northyorks.gov.uk.

Responses to the JSNA can be sent to jsna@northyorks.gov.uk, or JSNA, North Yorkshire House, Scalby Road, Scarborough YO12 6EE
16.0 **Rotherham**

16.1 **Status and membership**

According to the Rotherham Council website[^38] the following people are on the Board:

- Chrissy Wright
- Phil Foster
- Councillor Ken Wyatt (Chairman)
- Karl Battersby
- Chris Boswell
- Andy Buck
- Tom Cray
- Andrew Denniff
- Councillor John Doyle
- Chris Edwards
- Brian James
- Martin Kimber
- Councillor Paul Lakin
- Shona McFarlane
- John Radford
- Joyce Thacker
- David Tooth
- Janet Wheatley

16.2 **Focus of activity**

The latest JSNA is from 2011[^39]. It summarises information and analysis around the following:

- The demographic profile
- Social and environmental needs assessment
- Lifestyle and risk factors
- Burden of ill health
- Mental health needs assessment
- Learning disability needs assessment
- Social care needs assessment
- Access to health services
- User perspective on social care and health care
- Children and young people’s needs assessment
- Area assembly needs profile.

The Joint HWS runs from 2012-2015[^40]. The HWS sets out six key priorities:

1. Prevention and Early Intervention - Rotherham people will get help early to stay Healthy and increase their independence
2. Expectations and Aspirations - All Rotherham people will have high aspirations for their health and wellbeing and expect good quality services in their community, tailored to their personal circumstances

3. Dependence to Independence - Rotherham people will increasingly identify their own needs and choose solutions that are best suited to their personal circumstances
4. Healthy Lifestyles - People in Rotherham will be aware of Health risks and be able to take up opportunities to adopt Healthy lifestyles
5. Long-term Conditions - Rotherham people will be able to manage long-term conditions so that they are able to enjoy the best quality of life
6. Poverty - Reduce poverty in disadvantaged areas through policies that enable people to fully participate in everyday social activities and the creation of more opportunities to gain skills and employment.

16.3 Contact details
The Calderdale Forward document lists Tom Cray and Shona McFarlane as the main contacts for the Board:

- Tom Cray, Neighbourhoods And Adult Services Strategic Director, Tel: 01709 823401, tom.cray@rotherham.gov.uk, 2nd Floor Norfolk House, Walker Place, Rotherham, S65 1HX
- Shona McFarlane, Director of Health and Wellbeing, shona.mcfarlane@rotherham.gov.uk, Norfolk House, Walker Place, Rotherham, S65 1HX

The contact details listed for the chair (on the Rotherham council website41) are: Councillor Ken Wyatt (Chairman), 32 Church Street, Swinton, Mexborough, S64 8QA, Tel: 01709 583073.

41 http://moderngov.rotherham.gov.uk/mgCommitteeMailingList.aspx?ID=916
17.0 Sheffield

17.1 Status and membership

The Sheffield council website lists the following people as members of the Board:

- Dr Tim Moorhead (Joint Chair)
- Cllr Julie Dore (Joint Chair)
- Dr Margaret Ainger
- Dr Marion Sloan
- Dr Ted Turner
- Ian Atkinson (Chief Operating Officer of Sheffield’s Clinical Commissioning Group)
- Tim Furness (Associate Director of Business Planning and Partnerships at Sheffield’s Clinical Commissioning Group)
- Margaret Kitching (Nurse Director of South Yorkshire and Bassetlaw Cluster)
- Jayne Ludlam (Executive Director of Children, Young People and Families at Sheffield City Council)
- John Mothersole (Chief Executive of Sheffield City Council)
- Miranda Plowden (Director of Commissioning at Sheffield City Council)
- Helen Rowe (Vice Chair of Sheffield’s Local Involvement Network (LINk))
- Richard Webb (Executive Director for Communities at Sheffield City Council)
- Jeremy Wight (Director of Public Health)
- Cllr Jackie Drayton
- Cllr Harry Harpham
- Cllr Mary Lea

17.2 Focus of activity

The HWS is dated October 2012. The HWS defines the Board’s mission as follows:

- Tackle the main reasons why people become ill or unwell and in doing so reduce health inequalities in the city
- Focus on people – the people of Sheffield are the city’s biggest asset. We want people to take greater responsibility for their own wellbeing by making good choices. Services will work together with Sheffieldders to design and deliver services which best meet the needs of an individual
- Value independence – stronger primary care, community-based services and community health interventions will help people remain independent and stay at or close to home
- Ensure that all services are high quality and value for money

The document also notes that Sheffield’s City Strategy has five ambitions to make Sheffield a great, globally significant city:

- **Distinctive** – a city which is recognised for its distinctive and authentic character and for what the city has to offer
- **Successful** – a city with a strong, internationally successful economy where people have access to good jobs and businesses have everything they need to grow
- **Inclusive** - a city where everyone has a chance to succeed and fulfil their potential, and where people feel welcomed, valued and can fully participate in the life of the city.
- **Vibrant** – a diverse, creative, innovative city which continues to be an international destination of choice

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42 https://www.sheffield.gov.uk/caresupport/contactus/health-wellbeing-Board.html
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- **Sustainable** - a city where everyone plays their part to ensure that future generations can enjoy the city and its surrounding areas

It also details a series of guiding principles, which underpin decisions made about the city’s health and wellbeing services:

- Valuing the people of Sheffield
- Fairness and tackling inequality
- Tackling with wider determinants of health
- Evidence-based commissioning
- Partnership
- Prevention and early intervention through life
- Independence
- Breaking the cycle
- A health and wellbeing system designed and delivered with the people of Sheffield
- Quality and innovation

Finally there are five outcomes:

- Sheffield is a healthy and successful city
- The health and wellbeing of people in Sheffield is improving all the time
- Health inequalities are reducing
- People can get health, social care, children’s and housing services when they need them, and they’re the sort of services they need and feel it is right for them
- The health and wellbeing system in Sheffield is affordable, innovative and delivers excellent value for money.

The latest JSNA is dated February 2010. It is broken down into a number of thematic and geographic sections:

- Sheffield’s “Community Assemblies” (Central, East, North East, Northern, South, South East, South West)
- Black and minority ethnic communities
- Gender
- People are highest risk:
  - People in deprived communities
  - Looked after children
  - Adopted children and young people
  - Older people
  - People with physical disabilities, cognitive and sensory impairment
  - People with learning disabilities
  - People with Autistic spectrum disorders
  - People with mental health conditions
  - Carers
  - Newly arrived migrants
  - Homeless people
  - Lesbian, gay and bisexual people
  - People who experience domestic abuse
  - Offenders
  - Harmful and hazardous drinkers
  - People who misuse or are addicted to drugs
  - Safeguarding

Impact of recession
Implications for services (prevention, social capital, mental capital and wellbeing, universal services that promote independence, support at transition points, service quality and standards, choice and control, prioritisation, innovation, partnership, community voice, advocacy).

17.3 Contact details
Various contacts are listed for this Board:

- [healthandwellbeingboard@sheffield.gov.uk](mailto:healthandwellbeingboard@sheffield.gov.uk), Tel: 0114 205 7143
- Miranda Plowden, [Miranda.plowden@sheffield.gov.uk](mailto:Miranda.plowden@sheffield.gov.uk), Tel: 0114 273 4605
- Edward Banks
18.0 **Wakefield**

18.1 **Status and membership**  
According to the Calderdale Forward summary\(^{45}\), the Board is comprised of the following:

**Elected Members x 2:**
- The Cabinet member for Health and Social care  
- The Cabinet member for Children and Young People

**In attendance:**
- The Chief Executive of the council  
- The Corporate Director of Family Services (the Director of Children’s services)  
- Director of Adult services  
- The Corporate Director of Communities  
- The Chair of NHS Wakefield District  
- Non-exec member of NHS Wakefield District  
- The Chief Officer of the local NHs Cluster  
- The Director of public health  
- Chair of the Commissioning Executive Committee  
- One Representatives each from the three GP consortia (now CCG)  
- Chairperson of LINks.

18.2 **Focus of activity**  
The JSNA\(^{46}\) was subject to a series of joint development and engagement events run during late 2011 and early 2012. It is split into a number of sections, with data and analysis contained in each:

- Demography  
- Overall measures of health and wellbeing  
- Burden of ill health  
- Promoting wellbeing and preventing ill health  
- Wider determinants  
- Use of services.

The Wakefield HWS has recently been out for consultation (ending November 12 2012)\(^{47}\). This consultation has been testing the six priorities, drawn up using information from people who live and work in Wakefield from the JSNA. These are:

- Health inequalities  
- Early years  
- Mental health  
- Long term conditions  
- Older people  
- Healthy living and quality of life

18.3 **Contact details**  
The Calderdale Forward document lists Sam Pratheepan and Liz Blenkinsop as the main contacts:

\(^{46}\) [http://www.wakefieldjsna.co.uk/the_jsna_process.html](http://www.wakefieldjsna.co.uk/the_jsna_process.html)  
\(^{47}\) [http://www.wakefield.gov.uk/HealthAndSocialCare/HealthServices/HealthWellbeingBoard/strategyconsult.htm](http://www.wakefield.gov.uk/HealthAndSocialCare/HealthServices/HealthWellbeingBoard/strategyconsult.htm)
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- Mr Sam Pratheepan, Corporate Director Of Family Services, 01924 306740, spratheepan@wakefield.gov.uk, Room 210, County Hall, Bond Street, Wakefield, WF1 2QW
- Liz Blenkinsop, Joint Public Health Unit, Wakefield Council, EBlenkinsop@wakefield.gov.uk

Additionally, the HWS Consultation can be contacted at Public Health, Wakefield One, Wakefield Council, PO Box 700, Wakefield WF1 2EB, jphu@wakefield.gov.uk
19.0 York

19.1 Status and membership

Papers for the October 2012 Board meeting\(^{48}\) list the following as being members:

- Cllr Tracey Simpson-Laing (Chair)
- Cllr Janet Looker
- Cllr Sian Wiseman
- Kersten England
- Christopher Lloyd
- Mark Hayes
- Rachel Potts
- Jane Perger
- Peter Dwyer
- Angela Portz
- Patrick Crowley
- Chris Butler
- Paul Edmondson-Jones
- Mike Padgham

19.2 Focus of activity

The latest JSNA was prepared in 2012\(^{49}\). It contains data and analysis structured around the following themes:

- Population structure and projections
  - The population
  - Births and deaths
  - How and where people live
  - Specific population profiles and their needs (eg BME, disabled people)
  - Smaller and transient population groupings (eg looked after children, young offenders, adult carers, student community etc)

- Social and place wellbeing in York
  - Economy and income
  - Employment
  - Community wellbeing
  - Deprivation and inequality
  - Environment
  - Transport
  - Education
  - Housing
  - Crime and disorder

- Lifestyles in York
  - Smoking
  - Physical activity
  - Healthy eating
  - Obesity
  - Alcohol
  - Substance misuse


\(^{49}\) [http://www.york.gov.uk/content/socialcare/healthandwellbeinginyork2012.pdf](http://www.york.gov.uk/content/socialcare/healthandwellbeinginyork2012.pdf)
• A profile of health in York
  o Life expectancy
  o Mortality
  o Neonatal health
  o Teenage pregnancy
  o Dental health
  o Eye health
  o Long term conditions
  o Circulatory diseases
  o Respiratory disease
  o Long term neurological conditions
  o Cancer
  o Mental health
  o Health protection activities
  o Screening
  o Vaccinations
  o Sexual health

Following the publication of the JSNA, the Board has been consulting on its HWS during September 2012\textsuperscript{50}. This will be published in November 2012. According to an agenda for the City of YorOK Board (dated October 1 2012)\textsuperscript{51}, it is likely the strategy will focus on five themes:
  • enabling all children and young people to have the best start in life
  • improving mental health and intervening early
  • addressing health inequality
  • making York a great place for older people to live
  • resources and finances – a sustainable health and wellbeing local system

19.3 Contact details
The Calderdale Forward document lists Pete Dwyer as the main contact:
• Pete Dwyer, Director of Adults, Children & Education, Pete.Dwyer@york.gov.uk, City of York Council, Mill House, North Street, York, YO1 6JD

\textsuperscript{50} \url{http://www.yorkcvs.org.uk/content/health-and-wellbeing-strategy-consultation-event}
\textsuperscript{51} \url{http://www.google.co.uk/url?sa=t&rct=j&q=york%20%22health%20and%20wellbeing%20strategy%22&source=web&cd=5&ved=0CDUQFjAE&url=http%3A%2F%2Fwww.yor-ok.org.uk%2FDdownloads%2FYorOK%2520Board%2FOctober%25202012%2FAnnex%2520C%2520Cover%2520note%2520-%2520H%2520W%2520arrangements.docx&ei=5eyYUPmPB8ih0QWjuIDIDg&usg=AFQjCNG9Ndx-NEZnLe_6E9bzdDJcJ-XpYw}