



## SHEFFIELD HEALTH AND WELLBEING BOARD PAPER

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**Report of:** Councillor Julie Dore, Leader of Sheffield City Council  
Dr Tim Moorhead, Chair of NHS Sheffield Clinical Commissioning Group  
Margaret Kitching, Director of Quality and Nursing, NHS England (South Yorkshire and Bassetlaw)

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**Date:** 27<sup>th</sup> March 2014

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**Subject:** Health and Wellbeing Plans for Sheffield in 2014-15:  
Plans from Sheffield City Council, NHS Sheffield Clinical Commissioning Group and NHS England (South Yorkshire and Bassetlaw)

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**Author of Report:** Louisa Willoughby, 0114 205 7143

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### Summary:

Sheffield's Health and Wellbeing Board exists to bring together the many elements of the health and wellbeing system in Sheffield and provide a joint strategy and structure for making decisions that benefit the health and wellbeing of Sheffield people. The Board is built on positive and fruitful relationships and partnership between the organisations that commission health and wellbeing services across the city.

This paper presents the Health and Wellbeing Board's priorities for 2014-15. It also presents the plans for the different organisations on the Health and Wellbeing Board, which are shaped by the Health and Wellbeing Board's Joint Health and Wellbeing Strategy, service users' needs and budget considerations.

In addition, the paper presents the Board's ambitious plans for integrating health and social care over 2014-15 and beyond. This includes the Board's plans for the use of the Better Care Fund.

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### **Questions for the Health and Wellbeing Board:**

- Do the plans contribute enough to delivering the Joint Health and Wellbeing Strategy?
- Are there areas for greater joint working between the four organisations on the Health and Wellbeing Board (and others) in 2014-15 and looking to the 2015-16 budget setting process?
- Does the Board have any specific comments to make regarding any of the organisations' plans (Appendices A-C)?
- What role is there for Healthwatch Sheffield over the coming year in assisting with the implementation of these plans?

### **Recommendations for the Health and Wellbeing Board:**

- That the Board formally approves the plan for the Better Care Fund (Appendix D).
- That Board members and the Board's organisations commit to working together in an integrated way over the coming year.

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### **Background Papers and Appendices:**

- Health and Wellbeing Board Joint Health and Wellbeing Strategy: available online at <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/joint-health-and-wellbeing-strategy.html>.
  - Sheffield City Council Budget 2014-15: summarised in Appendix A with more detail online at <https://www.sheffield.gov.uk/your-city-council/finance/how-we-spend-budget.html>.
  - NHS Sheffield Clinical Commissioning Group Commissioning Intentions 2014-19: set out in Appendix B.
  - NHS England (South Yorkshire and Bassetlaw) Commissioning Intentions 2014-15: set out in Appendix C.
  - Sheffield Health and Wellbeing Board's plans for the integrated commissioning (including the Better Care Fund): set out in Appendix D and available online at <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/integration.html>.
  - Health and Wellbeing Board Forward Plan for 2014-15: set out in Appendix E.
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# HEALTH AND WELLBEING PLANS FOR SHEFFIELD IN 2014-15: PLANS FROM SHEFFIELD CITY COUNCIL, NHS SHEFFIELD CLINICAL COMMISSIONING GROUP AND NHS ENGLAND (SOUTH YORKSHIRE AND BASSETLAW)

## 1.0 SUMMARY

Sheffield's Health and Wellbeing Board exists to bring together the many elements of the health and wellbeing system in Sheffield and provide a joint strategy and structure for making decisions that benefit the health and wellbeing of Sheffield people. The Board is built on positive and fruitful relationships and partnership between the organisations that commission health and wellbeing services across the city.

This paper presents the Health and Wellbeing Board's priorities for 2014-15. It also presents the plans for the different organisations on the Health and Wellbeing Board, which are shaped by the Health and Wellbeing Board's Joint Health and Wellbeing Strategy, service users' needs and budget considerations.

In addition, the paper presents the Board's ambitious plans for integrating health and social care over 2014-15 and beyond. This includes the Board's plans for the use of the Better Care Fund.

## 2.0 WHAT DOES THIS MEAN FOR SHEFFIELD PEOPLE?

The Health and Wellbeing Board's Joint Health and Wellbeing Strategy recognises that good health and wellbeing is a matter for every service area, and that people are healthy and well not just because of the health and social care they receive, but also because of the nature of the housing, environment, communities, amenities, activities and economy surrounding them. The Board's Strategy focuses therefore not just on specific interventions to improve health and social care, but also on the 'wider determinants' of health. This means that the Health and Wellbeing Board aims for *all* Sheffield people to be *positively* affected by its plans to improve health and wellbeing in Sheffield.

Of course, the Health and Wellbeing Board cannot prevent all sickness and ill health, but this paper sets out plans to best support and maintain Sheffield peoples' health and wellbeing in 2014-15. The plans of the organisations which make up the Health and Wellbeing Board also have a preventative focus, working to delay people's need for long term help, care and support.

In creating its Joint Health and Wellbeing Strategy, the Health and Wellbeing Board has been careful to engage closely with Sheffield people and service users, providers and members of the public. The Board can be confident that its Strategy, and therefore its plans, reflect the needs and concerns of Sheffield people. Services will work together with Sheffield people to design and deliver services which best meet the needs of an individual.

## 3.0 HEALTH AND WELLBEING COMMISSIONING IN SHEFFIELD

### 3.1 A review of the Health and Wellbeing Board in 2013-14

Sheffield's Health and Wellbeing Board has existed as a statutory body since April 2013, and therefore from April 2014 will be entering its second year. 2013-14 was an effective year in which:

- A Joint Strategic Needs Assessment and a Joint Health and Wellbeing Strategy were approved, following consultation with over 1,500 citizens.
- The Board's work on the integration of health and social care began in earnest with two engagement events in July and October 2013, followed by further engagement. This paper and its appendices set out some of the practical implications following on from this engagement work.
- Work continued in each of the Board's five work programmes, including strategies for Food and Physical Activity in the city and continued work on giving children the best start in life.
- The Board heard about and responded to a range of issues, including the Dublin Declaration for Age-Friendly Cities and Communities, the Prime Minister's Challenge on dementia, the inquiries into Winterbourne View and Mid-Staffordshire, the Fairness Commission, and the Director of Public Health's Report.
- The Board was shortlisted in the Health Service Journal Awards for its partnership between the NHS and local government.
- Healthwatch Sheffield was formally established and became a full member of the Board.

### 3.2 An explanation of the different commissioning arrangements and responsibilities for improving health and wellbeing in Sheffield

'Commissioning' is the identification of needs and the buying of services to meet those needs. As the King's Fund's 'Alternative Guide to the NHS in England' demonstrates,<sup>1</sup> there is no simple commissioner of health and wellbeing services in Sheffield, and there is no simple way of identifying how much money is available and spent to improve health and wellbeing and to provide the vital services that people need to stay healthy and well.

In addition, as the Health and Wellbeing Board's Joint Health and Wellbeing Strategy recognises, health and wellbeing is supported by a number of things, not just direct GP, hospital or social care provision. It is therefore equally difficult to provide a full account of where resources are being deployed which will have an impact on health and wellbeing.

However, roughly speaking, in Sheffield the following organisations are responsible for commissioning and procuring health and wellbeing services:

- **Sheffield City Council** is responsible for a whole range of services and support for Sheffield people. Most explicitly in health and wellbeing terms it is responsible for: adult

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<sup>1</sup> For more information: <http://www.kingsfund.org.uk/projects/nhs-65/alternative-guide-new-nhs-england>.

social care, children's social care, public health and support for local communities. It is also responsible for some of the 'wider determinants' of health, such as education, employment and skills, economic development, libraries, town planning and housing, countryside and environment, and much more. In some areas the Council also provides the services people need as well as pays for them.

- **NHS Sheffield Clinical Commissioning Group** is responsible for commissioning a good proportion of NHS services in the city. It does not itself provide the services (this is done, mostly, by the main NHS providers in the city<sup>2</sup> and the independent and voluntary, community and faith sectors). The Clinical Commissioning Group is GP-led, ensuring clinical expertise is at the heart of decision-making.
- **NHS England South Yorkshire and Bassetlaw** is responsible for areas of commissioning that benefit from a *regional* perspective, such as specialised NHS services (like heart surgery and many areas of paediatric medicine and surgery) and some public health services (such as cancer screening and immunisation programmes). NHS England South Yorkshire and Bassetlaw is also responsible for funding Sheffield's GPs and other elements of primary care, such as dentistry, pharmacy and optometry.<sup>3</sup>
- Health and wellbeing services are commissioned and provided in Sheffield by other organisations, such as national charities or the Big Lottery Fund.<sup>4</sup> However, while being able and willing to fully support such initiatives, the Health and Wellbeing Board has little direct control over where the money is spent.

Sheffield's Health and Wellbeing Board is in a unique position to bring together the different organisations which commission health and wellbeing services in the city. Board members<sup>5</sup> come from a variety of backgrounds and from all of the three main commissioning organisations listed above, supported by Healthwatch Sheffield as the voice of Sheffield people.

It is important to note that the organisations listed above operate to different commissioning models and timeframes. As a national organisation, NHS England has to consult with a range of organisations and stakeholders; whereas the local authority and Clinical Commissioning Group are able to be much more driven by local priorities. However, while the local authority sets an annual budget in March of each year, the Clinical Commissioning Group sets out what it wishes to change over the coming year rather than setting out specific spending (and saving) plans. The differences in approach do not mean that sharing priorities and having joined-up, coordinated plans is impossible; however, it does mean that continuous effort is required to act in an integrated way between partners. This is one of the roles of Sheffield's Health and Wellbeing Board.

Section 4 below sets out the Health and Wellbeing Board's strategy and priorities for improving health and wellbeing in Sheffield in 2014-15 and section 5 details the plans of the partners on the Health and Wellbeing Board. Section 6 below sets out one of the main ways

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<sup>2</sup> Namely, Sheffield Teaching Hospitals NHS Foundation Trust, Sheffield Children's Hospital NHS Foundation Trust and the Sheffield Health and Social Care NHS Foundation Trust.

<sup>3</sup> See paper setting out the developing strategy for primary care in Appendix C.

<sup>4</sup> The Health and Wellbeing Board fully supports ongoing bids from partnerships in Sheffield to the Big Lottery as part of its Fulfilling Lives Programme: A Better Start and Ageing Better.

<sup>5</sup> For more information: <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/board.html>.

that the Health and Wellbeing Board is bringing the three commissioning organisations together to improve health and wellbeing in the city this year.

## **4.0 THE HEALTH AND WELLBEING BOARD'S PRIORITIES**

### **4.1 The Health and Wellbeing Board's Strategy**

Sheffield's Health and Wellbeing Board formally agreed in September 2013 a Joint Health and Wellbeing Strategy.<sup>6</sup> This was based on the evidence of the Joint Strategic Needs Assessment.<sup>7</sup> Both documents were agreed following extensive consultation with Sheffield people and with professionals who work in the fields of health and wellbeing.<sup>8</sup>

At the heart of the Strategy are five outcomes, listed below with the vision for each outcome:

#### **1. Sheffield is a healthy and successful city.**

- Partners and organisations across the city to actively look to improve health and wellbeing through all areas, even those not traditionally seen as being about health and wellbeing.
- Housing across the city to be of a good quality, well-insulated with affordable bills and healthy and safe facilities.
- Sheffield people to be well-trained and able to access a range of fairly paid employment opportunities irrespective of disability, and for the city's economy to grow supporting the health and wellbeing of the people of Sheffield.
- Poverty, such as income poverty, fuel poverty and food poverty, to reduce, and that those affected by poverty are supported and encouraged to lead healthy lives.

#### **2. Health and wellbeing is improving.**

- Sheffield children, young people, families adults to be emotionally strong and resilient, and for emotional wellbeing to be promoted across the city.
- Sheffield children, young people and adults to be living healthily – exercising, eating well, not smoking nor drinking too much alcohol – so that they are able to live long and healthy lives.

#### **3. Health inequalities are reducing.**

- Data about health inequalities in Sheffield to be excellent so that commissioners can be well-informed in tackling the issues.
- Sheffield's communities to be strong, connected and resilient, able to withstand crises and to support members of the community to live whole and healthy lives.
- Those groups especially impacted by health inequalities to have sensitive and appropriate services that meet their needs and improve their health and wellbeing.

<sup>6</sup> For more information: <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/joint-health-and-wellbeing-strategy.html>.

<sup>7</sup> For more information: <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/JSNA.html>.

<sup>8</sup> For more information: <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/events/strategy-consultation.html>.

#### 4. **People get the help and support they need and is right for them.**

- Sheffield people receiving excellent services which support their unique needs.
- Clear availability of information and support about health and wellbeing so that Sheffield people are able to help themselves.
- Patients and service users involved in decisions and their opinions valued.

#### 5. **Services are innovative, affordable, and deliver value for money.**

- Sheffield people at the centre of the Sheffield health and wellbeing system, underpinned by strong working relationships between commissioners with a clear methodology for joint working and pooled budgets underpinned by an innovative and affordable health and wellbeing system fit for the twenty-first century.
- A preventative system that seeks to help and identify people before they are really sick, enabling Sheffield people to stay healthy and well for longer.
- Frontline workers aware of health and wellbeing needs and able to signpost and support service users in obtaining the help they need.

### 4.2 The Health and Wellbeing Board's priorities for 2014-15

It is in the context of the vision set out in the Joint Health and Wellbeing Strategy that the Health and Wellbeing Board's priorities for 2014-15 have been formulated. These are as follows:

1. **Integration and health inequalities.** Board members have agreed two main areas of focus for 2014-15: integrating health and social care and tackling health inequalities in the city. More information about integrating health and social care is set out in section 6.0 and Appendix D.
2. **The Joint Health and Wellbeing Strategy.**<sup>9</sup> Over 2014-15, the Health and Wellbeing Board will monitor:
  - a. The Joint Health and Wellbeing Strategy's *outcomes*. Each outcome will be considered over the course of the year (see Appendix E).
  - b. The Joint Health and Wellbeing Strategy's *indicators of progress*. These will be considered in September 2014.
  - c. The Joint Health and Wellbeing Strategy's *work programmes*.<sup>10</sup> These will be considered in March 2014 and March 2015.
  - d. The *evidence base* for the Joint Health and Wellbeing Strategy. This is called the Joint Strategic Needs Assessment.<sup>11</sup> Updates will be provided as appropriate.

<sup>9</sup> For more information: <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/joint-health-and-wellbeing-strategy.html>.

<sup>10</sup> For more information: <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/joint-health-and-wellbeing-strategy/work-programmes.html>.

<sup>11</sup> For more information: <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/JSNA.html>.



3. **Commissioning by the organisations seated on the Board.** Health and Wellbeing Board partners have been involving one another in developing their plans for 2014-15 (see section 5.0 of this paper and appendices). Over the coming year, Board members will assist one another in delivering and formulating plans.
4. **Influencing and involving others.** As the key strategic lead for health and wellbeing in Sheffield, the Health and Wellbeing Board has a role to play in influencing partners and engaging with members of the public. It will do this through events and communications. The Board sends out a monthly e-newsletter which over 1,500 people receive and which publicises information about meetings, events and consultations, enabling individuals and organisations to get involved. Other tools are used to ensure that the Board's work is communicated across the city.<sup>12</sup>

Board meetings will consider all of these issues, and any upcoming and new issues, over the course of 2014-15. Individuals and organisations are invited to attend meetings, ask questions, and get involved in the agenda of the Board in 2014-15.

## 5.0 THE HEALTH AND WELLBEING BOARD'S PARTNERS' PLANS

The Health and Wellbeing Board has a role to play in commenting on and influencing the different plans of the Board's key partners. These are set out in brief below, and in detail in the Appendices:

- **Sheffield City Council's** plans cover a wider range of areas, based on the outcomes set out in the Council's Corporate Plan.<sup>13</sup> Under the Council's Better Health and Wellbeing Strategic Outcome,<sup>14</sup> the following four priorities have been set out:
  - Doing what we can to help people stay independent, safe and well.
  - Targeting our support on those that need it most, to reduce health inequalities.
  - Making sure services in this area are as efficient and effective as possible.
  - Working more closely with health services so that people get better coordinated help and support.
- **NHS Sheffield Clinical Commissioning Group**<sup>15</sup> has identified the following ambitions as part of its five-year plan:
  - All those who are identified to have emerging risk of admission through risk stratification, are offered a care plan, agreed between them and their clinicians (potentially 15,000 people).
  - To have integrated primary and community based health and social care services underpinned by care planning and a holistic approach to long-term conditions

<sup>12</sup> More information: <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board.html>.

<sup>13</sup> Sheffield City Council Budget 2014-15 is available online at <http://sheffielddemocracy.moderngov.co.uk/ieListDocuments.aspx?CId=154&MId=5373&Ver=4> with supporting detail at <https://www.sheffield.gov.uk/your-city-council/finance.html>.

<sup>14</sup> For more information: <https://www.sheffield.gov.uk/your-city-council/finance/2014-2015-budget.html>.

<sup>15</sup> See plans set out in Appendix A.



management to support people living independently at home, reducing emergency hospital admissions by up to 20% and emergency department attendances by up to 40%.

- Care requiring a specialist clinician will be brought closer to home, changing the place or method of delivery for a significant proportion of current hospital attendances.
- We will reduce the number of excess early deaths in adults with serious mental illness to be in line with the average of the best three core cities in England, and achieve similar improvements in life expectancy for people with learning disabilities.
- We will have put in place support and services that will help all children have the best possible start in life.
- **NHS England South Yorkshire and Bassetlaw**<sup>16</sup> has identified a range of objectives for the three areas of specialised work it commissions. These include:
  - Commission high quality services.
  - Reduce health inequalities and the variation in the uptake of services.
  - Concentrate services in centres of excellence.
  - Role of primary care services maximised in prevention of ill health and promotion of health and wellbeing.
  - Patient/user experience improves measurably.

## 6.0 INTEGRATED COMMISSIONING

Sheffield's Health and Wellbeing Board has a role to bring together and to coordinate the different areas of investment in health and wellbeing in Sheffield into a single approach and a shared vision that benefits Sheffield people and spends money effectively. This is one of the main purposes for and benefits of having a Health and Wellbeing Board, and Sheffield's Board takes this opportunity seriously.

In some areas, this calls for full integration of health and social care; that is, a removal of organisational barriers, budgets and perspectives to focus on the individual. The Board's Joint Health and Wellbeing Strategy consultation demonstrated that members of the public did not want to be passed from 'pillar to post' in the system, but wanted to receive excellent, individualised care.<sup>17</sup> Integrated, joined-up care that brings together NHS, social care, and other forms of care and support provided in people's homes and communities is massively important in improving people's health and wellbeing.

The four partners on the Health and Wellbeing Board will be working together to make changes to ensure they work and commission in a more integrated way to improve Sheffield

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<sup>16</sup> See plans set out in Appendix B.

<sup>17</sup> For more information: <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/events/strategy-consultation.html>.

peoples' experience. Explicitly, this will involve more direct sharing of budgets, risk, personnel and decision-making between organisations.

The Health and Wellbeing Board will be developing its plans for integration in a range of areas in 2014-15, ready for 2015-16 budgets. The plans include the Better Care Fund, which is a reallocation of £3.8billion<sup>18</sup> across the country to bring about a transformation in the way the NHS and local authorities work together and with local communities. This money needs to be spent in 2015-16, but local Health and Wellbeing Boards need to plan *now* to ensure the money can be spent in a year's time.

Sheffield's Better Care Fund plan,<sup>19</sup> which the Health and Wellbeing Board has a responsibility to approve in March 2014, sets out the following vision for integrated care:<sup>20</sup>

**We want to integrate health and social care so that:**

- People – including *children, young people and adults* – get the right care, at the right time and in the right place.
- People and their communities in Sheffield support each other to improve and maintain their wellbeing and independence.
- Organisations in Sheffield work together to help people and their communities to build and strengthen the support they provide to each other.
- Expert help is available to help people to take control of their own care so that it is genuinely person-centred, and complements and builds on the assets they have.
- Health and care services are focussed on a person's needs - organisational boundaries do not get in the way.

The Health and Wellbeing Board's work in 2014-15 will be focussed on four main areas, all areas that are in keeping with the ambitions set out in the Joint Health and Wellbeing Strategy:

1. Keeping people well in their local community.
2. Intermediate care.
3. Community equipment.
4. Long-term high support.

The Board is committed to working with members of the public and providers on this work in 2014-15. It is an exciting opportunity to remodel and redesign some areas of the health and wellbeing system so as to achieve better outcomes for Sheffield people.<sup>21</sup>

<sup>18</sup> For more information: [http://www.local.gov.uk/health-wellbeing-and-adult-social-care/-/journal\\_content/56/10180/4096799/ARTICLE](http://www.local.gov.uk/health-wellbeing-and-adult-social-care/-/journal_content/56/10180/4096799/ARTICLE).

<sup>19</sup> See Appendix D and <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/integration.html>.

<sup>20</sup> This vision built on the engagement events the Health and Wellbeing Board ran in 2013. For more information: <https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/events/engagementevent.html>.

<sup>21</sup> To register your interest in being involved, go to <https://www.surveymonkey.com/s/GDP7XX9>.

## **6.0 QUESTIONS FOR THE BOARD**

- Do the plans contribute enough to delivering the Joint Health and Wellbeing Strategy?
- Are there areas for greater joint working between the four organisations on the Health and Wellbeing Board (and others) in 2014-15 and looking to the 2015-16 budget setting process?
- Does the Board have any specific comments to make regarding any of the organisations' plans (Appendices A-C)?
- What role is there for Healthwatch Sheffield over the coming year in assisting with the implementation of these plans?

## **7.0 RECOMMENDATIONS FOR THE BOARD**

- That the Board formally approves the plan for the Better Care Fund.
- That Board members and the Board's organisations commit to working together in an integrated way over the coming year.

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