

AGENDA

Health and Wellbeing Board

Date: **Tuesday 17 January 2012**

Time: **4.00 pm**

Place: **Council Chamber - Brockington**

Notes: Please note the **time, date** and **venue** of the meeting.

For any further information please contact:

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Agenda for the Meeting of the Health and Wellbeing Board

Membership

Chairman

Councillor PM Morgan

Dr Sarah Aitken
Jacqui Bremner
Peter Brown
Chris Bull
Jo Davidson
Claire Keetch
Jo Newton
Dr Andy Watts
Mr Martin Woodford

Interim Director of Public Health
Local Involvement Network
Herefordshire Business Board
Chief Executive Herefordshire Public Services
Director for People's Services
Third Sector Board
Chairman NHS Herefordshire (PCT) Board
Chair - Clinical Commissioning Group
Chief Executive - Wye Valley NHS Trust

GUIDANCE ON DECLARING PERSONAL AND PREJUDICIAL INTERESTS AT MEETINGS

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You also have a personal interest in a matter if it relates to any interests, which you must register.

What do I need to do if I have a personal interest?

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- c) the interest does not fall within one of the exempt categories at paragraph 10(2)(c) of the Code of Conduct.

What do I need to do if I have a prejudicial interest?

If you have a prejudicial interest you must withdraw from the meeting. However, under paragraph 12(2) of the Code of Conduct, if members of the public are allowed to make representations, give evidence or answer questions about that matter, you may also make representations as if you were a member of the public. However, you must withdraw from the meeting once you have made your representations and before any debate starts.

AGENDA

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1.	APOLOGIES FOR ABSENCE To receive apologies for absence.	
2.	NAMED SUBSTITUTES (IF ANY) To receive any details of Members nominated to attend the meeting in place of a Member of the Committee.	
3.	DECLARATIONS OF INTEREST To receive any declarations of interests of interest by Members in respect of items on the Agenda.	
4.	MINUTES To approve and sign the Minutes of the meeting held on 18 October 2011.	1 - 6
5.	ALCOHOL HARM REDUCTION STRATEGY - UPATE To note progress and next steps in relation to developing the Alcohol Harm Reduction Strategy.	7 - 10
6.	HEREFORDSHIRE'S CHILD POVERTY STRATEGY 2011-2015 To endorse the Child Poverty strategy before approval by Cabinet.	11 - 30
7.	HEREFORDSHIRE HEALTH-CARE COMMISSIONING CONSORTIUM - SYSTEM PLANNING To receive a presentation on progress development of the 2012/13 system plan.	
8.	PUBLIC HEALTH TRANSITION UPDATE To update the Board on action to implement the Public Health reforms for Herefordshire.	31 - 32
9.	HEALTH AND WELLBEING STRATEGY 2012/13 ENGAGEMENT PLAN To receive an update.	
10.	HEALTH AND WELLBEING BOARD WORK PROGRAMME To consider the current work programme.	33 - 38
11.	FUTURE MEETINGS The following meetings have been scheduled: Tuesday, 21 February 2012 , 2.00 pm (workshop) Tuesday, 20 March 2012, 2.30 pm Tuesday, 17 April 2012, 2.00 pm (workshop) Tuesday, 15 May 2012, 2.00 pm	

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- Inspect background papers used in the preparation of public reports for a period of up to four years from the date of the meeting. (A list of the background papers to a report is given at the end of each report). A background paper is a document on which the officer has relied in writing the report and which otherwise is not available to the public.
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HEREFORDSHIRE COUNCIL

BROCKINGTON, 35 HAFOD ROAD, HEREFORD.

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HEREFORDSHIRE COUNCIL

MINUTES of the meeting of Health and Wellbeing Board held at Council Chamber - Brockington on Tuesday 18 October 2011 at 2.00 pm

Present: Councillor PM Morgan (Chairman)

Ms J Bremner, Mr P Brown, Mr CJ Bull, Mrs J Davidson Dr S Ghazawy,
Mrs C Keetch, Mrs J Newton, Dr A Talbot-Smith and, Mr M Woodford

In attendance: Councillor JG Jarvis and Mr J Reeves.

12. APOLOGIES FOR ABSENCE

Apologies were received from Dr S Aitken and Dr A Watts.

13. NAMED SUBSTITUTES

Dr A Talbot-Smith for Dr S Aitken and Dr S Ghazawy for Dr A Watts.

14. DECLARATIONS OF INTEREST

None.

15. MINUTES

RESOLVED: That the Minutes of the meeting held on 21 June 2011 be confirmed as a correct record and signed by the Chairman.

16. ESTABLISHING THE EVIDENCE BASE FOR COMMISSIONING

The Board considered the 2011 Joint Strategic Needs Assessment and State of Herefordshire Reports (SOH), and received an overview of the work being undertaken across Herefordshire Public Services to develop an overall Integrated Needs Assessment (INA).

The Consultant in Public Health (Commissioning and Health Intelligence) presented the report highlighting the key findings and recommendations.

The documents for 2011 represented a refresh of the 2010 documents. As reported to the Board in June it was intended to develop a "gold standard" INA within three years. It was expected that as part of this process the Joint Needs Assessment and the State of Herefordshire report would be incorporated into a single integrated evidence base for commissioners available online.

In discussion the following principal points were made:

- That whilst there was no accepted definition of a "gold standard" for an INA there was a clear Herefordshire view as to what it should contain. The test would be the extent to which the INA assisted the Board in assessing whether there was an evidence base to support commissioning decisions. An update would be provided to the Board on the INA's development. In the meantime the importance of the JSNA and SOH as documents on which the Board would need to base its future decisions was emphasised.

- Concerns about performance in Early Years and action that had been taken and continued to be taken to achieve improvement were noted.
- That there was little in the documentation about vulnerable children and adults and safeguarding but these were significant health improvement issues.
- That consideration was being given to how best to make the information in the JSNA and SOH available to various audiences.
- That it was important that commissioners and providers gave careful consideration to how best to the findings in the JSNA and SOH could be used to inform the debate about priorities. System leadership by the Board was then required to ensure partners acted in a complementary way to deliver the measures identified as necessary to address the agreed priorities.

RESOLVED:

- That (a) the 2011 JSNA key points and recommendations document be noted;**
- (b) the 2011 State of Herefordshire key findings report be noted;**
- (c) the plans to develop an Integrated Needs Assessment be noted and an update provided to the Board; and**
- (d) further consideration be given by the Board to how it would use the information in the documentation in its future work in setting priorities within the Health and Wellbeing Strategy.**

17. HEREFORDSHIRE HEALTHCARE COMMISSIONERS - UPDATE

The Board received an overview of the activities of Herefordshire Health-Care Commissioners.

The Deputy Chair (HHC) presented the report.

In discussion the following principal points were made:

- It was reported that the financial plan envisaged a 3% increase in resources in 2012/13. This represented a shortfall of 3.5% in the level of resources required to meet current public expectations. This created a risk that it may not be possible to design a viable system. Discussions were ongoing with Wye Valley NHS Trust to see how it might be possible to align strategies to achieve financial balance.
- The HHC was engaged in a rapid transition process. The Council, Primary Care Trust and Wye Valley NHS Trust were also undergoing rapid change. The HCC recognised the need to work with all parts of the health and social care system and put processes in place to manage relationships.
- The Health and Wellbeing Board's role in promoting integrated care and ensuring that the commissioning plans of the HCC were formed with an understanding of their impact on the health and social care system as a whole was noted. The need to take account of reductions in third sector funding was also highlighted.

RESOLVED: That the actions being taken by the Herefordshire Healthcare Commissioners and the importance that the steps in their

development had regard to the needs of the health and social care system as a whole be noted.

18. INTEGRATED NEEDS ASSESSMENT - ALCOHOL NEEDS ASSESSMENT

The Board considered the methodology used to develop the alcohol integrated needs assessment and the resulting recommendations.

The Consultant in Public Health (Health Improvement) presented the report, a copy of which had been circulated separately.

Members agreed that the methodology that had been used to develop the integrated needs assessment would form a sound basis for future assessments and the Board's approach to developing strategy.

That once the resulting draft strategy was prepared the challenge for the Board would be to translate it into action and engage all the relevant bodies in delivering the desired outcomes. It would be important to focus on those aspects where those involved could bring direct influence to bear.

RESOLVED: That

- (a) the methodology developed for this alcohol INA be adopted as the Health and Wellbeing Board's standard Integrated Needs Assessment (INA) methodology;**
- (b) the INA be used to inform the development of an alcohol harm reduction strategy in the context of a commissioning cycle;**
- (c) a coordinated range of actions be undertaken to address alcohol-related harm to health using the ladder of interventions as a conceptual framework;**
- (d) data collection and surveillance on alcohol-related harm to health continues to be developed and refined ("step 1 of the ladder");**
- (e) social marketing campaigns be developed to reduce alcohol-related harm to health in young people ("step 2 of the ladder");**
- (f) IBA (identification and brief advice) services should be expanded across health and non-health settings increasing the number of at risk people who are supported and allowing specialist services to focus on specialist care ("middle of the ladder");**
- (g) clear commissioning intentions for integrated alcohol services are developed using the NTA's stepped model which covers tier 1 to tier 4 services ("middle of the ladder");**
- (h) work continues to build on existing partnership initiatives to reduce alcohol-related harm to health through influencing default choices, incentives, disincentives and enforcement ("top of the ladder"); and**
- (i) the draft alcohol harm reduction strategy be reported to the Board including proposals for its effective implementation.**

19. DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2011

The Board was informed of key population health issues in Herefordshire and of the recommended strategies and actions to address these as set out in the Annual Report of the Director of Public Health – 2011

The Board was invited to support the view that the recommended approach and actions highlighted in the report would inform service development and commissioning aimed at improving health and wellbeing of the population of Herefordshire.

The Consultant in Public Health (Health Improvement) presented the report, which had been circulated separately, outlining the main aspects of each Chapter of the Annual Report.

A list of ten key messages from the report and the preceding needs assessment was circulated and the Chairman encouraged all Members to take the messages to heart. A copy is appended to these Minutes.

In discussion the following principal points were made:

- That the key issue the Board needed to consider was how it responded to the report's findings as part of the commissioning cycle and this should be incorporated into the Board's work plan.
- It was noted that an event was being planned for January 2012 to generate wider community and stakeholder involvement in considering priorities. This work needed to be linked to the work of the Clinical Commissioning Consortium.
- That the Board was the only place where some subjects such as safeguarding of adults and of children were considered together. It would be useful to identify a list of issues where the Board played such a role and consider them on every occasion.

RESOLVED: That the Director of Public Health's Annual Report 2011 executive summary be considered further during the development of the Health and Wellbeing Strategy.

20. COMMUNICATIONS PLAN

The Board considered the local communications strategy designed to support the locally and nationally driven changes to public services, what activities had been achieved to date and how the Health and Wellbeing Board agenda fits into the overall strategic communication considerations.

The Assistant Director, Customer Services and Communications presented the report, which had been circulated separately. He acknowledged that the strategy was a work in progress.

The Board discussed aspects of the strategy, noting in particular the need to provide the public with a clear understanding of the changes to the health and social care system and promote key messages, including increased personal responsibility for healthcare.

RESOLVED: That a further report on the Strategy be made to the Board with a particular focus on the key messages for health and wellbeing and the profile of the Board.

21. HEALTH AND WELL BEING BOARD UPDATE AND WORK PROGRAMME

The Board received an update on the current position with its development, including the revised Development Framework and a proposed outline draft Work Plan for the next six months picking up the key development themes agreed by the Board and setting out the next steps to be addressed.

The Deputy Chief Executive presented the report inviting Members to identify any aspects of the Board's role they thought were not reflected in the report and work plan.

It was noted that the following issues identified during the meeting would be incorporated into the work plan:

- an update on the development of an overall Integrated Needs Assessment
- draft alcohol harm reduction strategy
- Communications Strategy
- Response to findings in the Director of Public Health's Annual Report

RESOLVED:

That (a) the update and next steps be noted; and

(b) the Work Plan as amended be approved.

22. FUTURE MEETINGS

The Board noted the list of scheduled meetings.

The meeting ended at 4.15 pm

CHAIRMAN

MEETING:	HEALTH AND WELLBEING BOARD
DATE:	17 JANUARY 2012
TITLE OF REPORT:	ALCOHOL HARM REDUCTION STRATEGY – UPDATE
REPORT BY:	Dr Sarah Aitken & Dr Alison Merry

CLASSIFICATION: Open

Wards Affected

County-wide

Purpose

To note progress and next steps in relation to developing the Alcohol Harm Reduction Strategy.

Recommendation(s)

THAT: the Board notes the progress made to date in bringing workstreams together and notes proposed next steps in relation to the development of a single, unified Alcohol Harm Reduction Strategy for Herefordshire.

Key Points Summary

- In its work to develop a Health and Wellbeing Strategy, the Health and Wellbeing Board is focusing initially on alcohol harm reduction using a commissioning cycle approach.
- As the first step in this process an integrated needs assessment (INA) for alcohol harm reduction has been developed. This was discussed by the Health and Wellbeing Board on 18th October 2011.
- The alcohol INA contained a series of recommendations based on local needs, existing services and the evidence of effectiveness for interventions. These were set out using the ladder of interventions as a framework.
- Following on from this as the next step, these recommendations have now been developed into an Alcohol Harm Reduction Strategy with the aim of reducing alcohol-related harm and which identifies timeframes and lead organisations alongside each recommendation.
- In addition to this work, Herefordshire Partnership's Alcohol Group has developed an action plan with the following aims:
 - Educate and raise awareness of sensible drinking;
 - Reduce violent crime linked to alcohol consumption;
 - Contribute to a reduction in alcohol related assaults presenting at A&E;

Further information on the subject of this report is available from
Dr Sarah Aitken on 01432 260668

- Intervene early to prevent potential violent crime and disorder.
- An initial assessment shows that both strategic plans share the common aim of reducing alcohol-related harm - whether this be harm to health and/or harm relating to crime and disorder – and that the actions within the two plans are complementary and compatible with each other.
- Bringing these two streams of work together to create a single, unified Alcohol Harm Reduction Strategy will enable Herefordshire to take a truly joined up, multi-agency approach to alcohol harm reduction across the county. Initial discussions at Herefordshire Partnership Executive Group (6th January 2012) have established the commonality between these strategic plans and the benefits of agreeing a shared strategy.
- Next steps to achieve this are as follows:
 - Joint work during February 2012 to develop a single, unified Alcohol Harm Reduction Strategy for Herefordshire;
 - Alcohol Harm Reduction Strategy agreed and signed off by both Herefordshire Partnership and Health and Wellbeing Board;
 - Completed Alcohol Harm Reduction Strategy to be presented at the March 2012 meeting of the Herefordshire Health and Wellbeing Board;

Alternative Options

- 1 The Board could propose a range of alternatives.

Reasons for Recommendations

- 2 A single county-wide plan will enable a joined up approach to tackling alcohol harm relating to health and to crime and disorder.

Introduction and Background

- 3 The Health and Wellbeing Board has agreed to look at alcohol-related harm to health and alcohol harm reduction services. An alcohol integrated needs assessment (INA) was discussed by the Health and Wellbeing Board in October 2012. The development of an alcohol harm reduction strategy is the next step in the commissioning cycle.

Key Considerations

- 4 The recommendations from the INA form the basis of an alcohol harm reduction strategy based on the ladder of interventions. The Herefordshire Alcohol Group (Herefordshire Partnership) has also been working on plans to reduce alcohol-related harm. This paper proposes a plan for bringing these two workstreams together to create a single, unified Alcohol Harm Reduction Strategy for the county with a view to this being approved by both the Health and Wellbeing Board and the Herefordshire Partnership by the end of March 2012. The unified Strategy will address both harm to health and harm relating to crime and disorder. This is an opportunity for a single strategy for alcohol harm reduction to be agreed by both the Health and Wellbeing Board and Herefordshire Partnership and for a unified, multi-agency approach to alcohol harm reduction to be adopted across Herefordshire.

Community Impact

- 5 This will be address within the Strategy.

Financial Implications

6 Financial implications will be addressed within the Strategy.

Legal Implications

7 To be addressed as appropriate within the Strategy.

Risk Management

8 This will be addressed as necessary within the Strategy

Consultees

9 A range of stakeholders were consulted during the development of the INA. Initial discussions on bringing the workstreams together have taken place at Herefordshire Partnership Executive Group.

Appendices

10 None

Background Papers

- None identified.

MEETING:	HEALTH AND WELLBEING BOARD
DATE:	17 JANUARY 2012
TITLE OF REPORT:	HEREFORDSHIRE'S CHILD POVERTY STRATEGY 2011 – 2015

CLASSIFICATION: Open

Wards Affected

County-wide

Purpose

To endorse the Child Poverty strategy before approval by Cabinet.

Recommendation(s)

THAT the Board:

- (a) provides feedback on the strategy and endorses the strategy before approval by Cabinet; and
- (b) confirms that the Board members are key leaders in ensuring this strategy is considered in all aspects of HPS work and in enabling delivery of the strategy.

Key Points Summary

- The Child Poverty Act 2010 was established to put in place the action required to meet the 2020 vision to end child poverty. The present government affirmed its commitment to the Child Poverty Act and has produced a child poverty strategy in accordance with the requirements of the Act. The Act requires local authorities to prepare, publish and refresh both child poverty needs assessments and strategies, acting as leaders for a local, partnership approach. Herefordshire's Child Poverty Needs Assessment was published last year and forms part of the Joint Strategic Needs Assessment.
- Herefordshire's Child Poverty Strategy has been developed through a steering group and workshop approach with partners, including wider public services and the voluntary sector and is attached. At a national and local level, the dramatic and deep effects of the economic crisis continue to be a source of concern for the immediate and long term futures of children and young people. The Strategy provides a coordinated approach to child poverty in Herefordshire, but does not propose additional resources.

Further information on the subject of this report is available from
Philippa Granthier, Head of Commissioning (Children's Services) on (01432) 260226

How will your report meet the vision and guiding principles of the HWBB?

The Child Poverty strategy will contribute to an extent to most of the principles of the HWBB, but in particular it meets principle 5:

Principle 5

People's basic level of health and wellbeing starts in the womb and accumulates throughout life. There are differences in health and wellbeing depending on background and living environment. Health outcomes are worse for people from more deprived areas and it is important to work with people throughout their lives to reduce health inequalities. A vital part of this is a healthy workforce is for the county. There are wider influences on health and wellbeing and these must be acknowledged and built into all decision making by Herefordshire Public Services and its partners.

Nearly 4,500 children and young people are growing up in poverty in Herefordshire.

Herefordshire's strategy will address child poverty by:

- Preventing poor children from becoming poor adults, breaking cycles of poverty
- Promoting ambition, skills, and capabilities of children and families in poverty enabling them to move out of poverty
- Improving family circumstances including homes to enable children and young people to thrive and take full opportunities in education and be able to work in well paid employment with training and development opportunities
- Creating opportunities for people to meet their economic potential through work

Reasons for Recommendations

1. Child poverty matters because:

- Children and young people are experiencing the effects now, they are often excluded from many of the things that other children and young people enjoy and that society would aspire to
- Children within families who are poor tend to have lower educational attainment. Low skill levels and consequent productivity is seen to stunt economic growth, limiting the UK's ability to compete in the global economy.
- There are strong links between child poverty and poor outcomes. Poorer outcomes for children and families place extra burdens and costs on public services, such as health care and children's services and affect everybody's day to day experiences of safety and well-being.
- Communities suffer through increased deprivation and inequalities which reduce social cohesion. The costs of child poverty fall on individuals, families, communities and the taxpayer.
- Many people believe there is very little child poverty in the UK today. This is not the case: over a fifth of children are in poverty (taken from Ending Child Poverty: Everyone's Business March 2008). This figure is widely recognised to have worsened over the past three years.
- The economic crisis from 2008 has fundamentally affected the opportunities and life chances of many people in the UK. Arguably the poorest have been the worst affected, along with young people as recent national and local figures for people under the age of 25 not in education, training or employment have illustrated

2. The Child Poverty Strategy contributes to the work of the Health and Wellbeing Board in Herefordshire and also strategic intentions captured within the Economic Development Strategy. It is not a distinct approach, but one that provides a clear focus, a multi agency approach, and an opportunity for others to consider needs and activity and decide what they can do to align their own work. This has taken place with representatives of the South Wye Partnership and could be replicated in other localities in Herefordshire.
3. The Strategy contains proposals for governance, monitoring and refresh (page 11 of the Strategy).

Introduction and Background

4. This report is to seek the views and endorsement of the HWBB to Herefordshire's Child Poverty Strategy, which is a requirement of the Child Poverty Act 2010. The strategy has been created through the development and use of the Child Poverty Needs Assessment, another requirement of the Act. This assessment is now an embedded part of Herefordshire's Joint Strategic Needs Assessment ensuring that child poverty needs are identified and integral to a holistic needs assessment across HPS.
5. The Child Poverty Strategy 2011-2015 was produced through a working group, working on behalf of the then Children's Trust and Herefordshire Partnership.
6. The Herefordshire Child Poverty Needs Assessment provides a clear summary of the issues involved in child poverty. 2010 data suggests that 4,370 children under the age of 16 are currently living in poverty in Herefordshire. It is a multi faceted problem for society and for all statutory and non-statutory services working for the interests of communities.
7. The Director of Public Health Annual Report 2011 Executive Summary also highlights the importance of intervention in the Foundation Years (early years) of a child's life in terms of improved outcomes and cost effectiveness of any early intervention. *People from deprived socio-economic groups not only have shorter lives but also spend more of their later years living with a chronic disease or disability.. This social gradient in health starts in the womb and accumulates through life.. with the most effective interventions being those in the first years of life. Action to reduce child poverty has close synergy with action to improve population health because reducing the social gradient in readiness for school at age 5 is the effective way to achieve both goals.*

Key Considerations

Making the strategy happen

8. This initiative forms 3.4 of the Joint Corporate Plan and contributes to the delivery of a number of strategic intentions and plans, including the Economic Development Strategy, our approach to housing, and the developing Health and Wellbeing Strategy. As a key part of the Joint Corporate Plan, Herefordshire Public Services Leadership Team has an important role to play in directing and leading the implementation of the strategy. Alongside that, the Council and the Health and Wellbeing Board will have a significant leadership and enabling role.
9. There is a requirement to have both a strategy and needs assessment and for them to be reviewed and updated. The needs assessment identifies the profound issues facing children who grow up in poverty and that these are evident in areas of Herefordshire. The Strategy sets out why issues are important in Herefordshire and also what activity is being undertaken to address them.

10. The Strategy is presented in such a way as to enable partners, community groups and others to consider how they might also contribute to addressing child poverty in Herefordshire. The Local Authority can use the Strategy to exercise its community leadership role.
11. The effectiveness of the Strategy will be kept under review through a number of different ways. Importantly the activities are positioned as ones that are central to different service areas, rather than “add-ons” that require additional activity and governance arrangements.
12. As there is a requirement to refresh the strategy on an annual basis, it is proposed to publish the strategy as a working document. This will then be used with a variety of groups, as well as with partnership bodies, to raise awareness and promote the use of the needs assessment and strategy by others. Activity that contributes to the delivery of the strategy will be captured.
13. It is proposed that the Children and Young People’s Partnership Forum be used to oversee the impact of work in Herefordshire in a holistic way. They will hold individual agencies and services to account for the delivery of the activity identified in the strategy. Furthermore, it is proposed that the strategy is refreshed through this forum with the updated version being considered by the Health and Wellbeing Board along with a progress report. The Council’s Cabinet will also receive an annual progress report.
14. There has been some debate on how to measure the effectiveness of the Strategy and this will be refined through the work of the Children and Young People’s Partnership Forum. The factors that contribute to child poverty are numerous and significant, with the recent national economic position playing a considerable part. Herefordshire’s Child Poverty Strategy is ambitious whilst at the same time recognising that the national and local context can only be influenced to a degree in some areas.

Community Impact

15. Child Poverty is a significant issue for a number of localities in Herefordshire, as illustrated in the Child Poverty Needs Assessment. Community approaches to meeting the challenges of child poverty can fundamentally improve the lives of children and young people in Herefordshire, and can break cycles of poverty which are evident in particular areas within wards.

Financial Implications

16. The Strategy does not have a separate resource plan. It has been produced by combining the individual activities across a range of services and partners, recognising that there are few national grants now available and that local authorities have a fundamental role in coordinating and leading action, more so than perhaps commissioning or paying for all the activity that will make a difference.

Legal Implications

17. The Act requires a local authority to prepare and publish an assessment of needs of children living in poverty in its area. This must be published by September 2010, refreshed every 12 months and reviewed and revised within 3 years of being first published.
18. The Act requires local authorities and their partners to turn cooperation and their needs assessment into effective local child poverty strategies. These must be published by April 2011, reviewed and refreshed every 12 months and fully revised every 3 years

Risk Management

19. The risks to individuals and to society as a whole are such that the Child Poverty Act 2010 was reaffirmed by the present government, although it was introduced by the last Labour government. The national strategy establishes an overarching approach but doubts have been expressed about what can be done in some areas in the face of the economic situation. Locally, risks to opportunity, quality of life, basic needs, and wider society goals can be addressed through the strategy and the range of strategic intentions that HPS has established through the life of this Council. Fundamental activities to create employment and housing for local people will do much to reduce the risk of child poverty in the future, as will effective changes to people's health.

Consultees

20. Consultation has taken place with services within HPS and with voluntary organisations through a workshop approach.

Appendices

Herefordshire Child Poverty Strategy 2011 - 2015

Background Papers

Herefordshire's Child Poverty Needs Assessment

September 2011

Child Poverty Strategy 2011-2015

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Child Poverty Strategy 2011-2015

1. Introduction

“Out of every five children, one is currently living in poverty. 2 million live in poor housing – crowded rooms, squalid conditions, dangerous buildings too. These kinds of beginnings can hold a child back for his or her whole life. At just 22 months a poor child’s skills already trail behind those of better off toddlers. At age 5 that poor child, even if he or she is very bright, will have been overtaken at school by a less talented but more privileged classmate. By 16 he or she is just half as likely to get five good GCSEs, including English and Maths. And, at the other end of their life, a child born today in England, in the poorest neighbourhoods will still die, on average, 7 years before a child born in the richest.”

Government statement, 2010

Children and young people are growing up in poverty in Herefordshire. The effects of this will resonate throughout their lives, and are entwined with everyone else. They affect the growth and enrichment of society as a whole and affect the way individuals, communities, independent and voluntary organisations, and the public and private sectors use money and people. Successive national governments have recognised the profound impact of child poverty and the relationships with many different areas of society and services. The Child Poverty Act of 2010 has been endorsed by the government that came to power in 2010 and this government published its national strategy for Child Poverty in 2011¹.

In Herefordshire we can make a difference and transform the lives of our children, young people, families and communities together. This strategy is based on Herefordshire’s Child Poverty Needs Assessment, part of our overall Joint Strategic Needs Assessment. It sets out what we will do in the key areas affecting child poverty and also provides the opportunity for others to become involved and target their own activities to make improvements in their own local communities.

2. Vision

In Herefordshire we aim to address child poverty by:

- Preventing poor children from becoming poor adults, breaking cycles of poverty
- Promoting ambition, skills, and capabilities of children and families in poverty enabling them to move out of poverty
- Improving family circumstances including homes to enable children and young people to thrive and take full opportunities in education and be able to work in well paid employment with training and development opportunities
- Creating opportunities for people to meet their economic potential through work

¹ [A New Approach to Child Poverty: Tackling the Causes of Disadvantage and Transforming Families' Lives](#)

3. Herefordshire solutions

Herefordshire's Child Poverty Strategy sets out the areas of work we will focus on for the next four years. Herefordshire Public Services and partners have been working on many of these areas of work for some time; however, this strategy is the mechanism for pulling them together into a coherent strategy focused on tackling child poverty. This strategy, along with the child poverty needs assessment, enables others to think about what they can contribute and determine their own actions to address child poverty. Detailed actions are contained in individual service and business plans.

4. Definitions

Following extensive consultation, *Measuring Child Poverty*² set out a new tiered approach to measuring child poverty in the UK over the long-term.

- absolute low income: this indicator measures whether the poorest families are seeing their income rise in real terms. The level is fixed as equal to the relative low-income threshold for the baseline year of 1998-99 expressed in today's prices;
- relative low income: this measures whether the poorest families are keeping pace with the growth of incomes in the economy as a whole. This indicator measures the number of children living in households below 60 per cent of contemporary median equivalised household income; and
- material deprivation and low income combined: this indicator provides a wider measure of people's living standards. This indicator measures the number of children living in households that are both materially deprived and have an income below 70 per cent of contemporary median equivalised household income.

The Government monitors child poverty against all three measures with a target attached to the relative low-income measure, recognising that when family income falls below that of others in society, this has additional negative outcomes including inequality of opportunity and social exclusion.

The most familiar definition of Child Poverty is:

Proportion of children under 16 living in families in receipt of Child Tax Credit whose reported income is less than 60 per cent of the median income or in receipt of Income Support or (Income-Based) Job Seekers Allowance.

5. National Drivers

The Government's national Child Poverty Strategy sets out a new approach to tackling poverty up to 2020. Strengthening families, encouraging responsibility, promoting work, guaranteeing fairness and providing support to the most vulnerable are at the heart of this strategy. It is set against the backdrop of the Child Poverty Act 2010, which established income targets for 2020 and a duty to minimise socio-economic disadvantage. It has also been developed in the context of a Spending Review that placed a very high priority on improving the life chances of children and the protection of vulnerable families, while also making crucial progress in reducing the nation's fiscal deficit.

² [Measuring Child Poverty](#)

The Government's focus is on "combating worklessness and educational failure and preventing family and relationship breakdown with the aim of supporting the most disadvantaged groups struggling at the bottom of society." It is important to recognise the context in which a child is raised, alongside factors including education and income.

The national strategy has been informed by independent reviews by Frank Field MP³ and Graham Allen MP⁴. As a result, the Government is working on developing new life chances indicators, taking account of Field's recommendations and those in Dame Clare Tickell's review of the Early Years Foundation Stage⁵.

6. Herefordshire Profile

This Child Poverty Strategy has been informed by a comprehensive [Child Poverty Needs Assessment](#) which was completed in March 2011 and which will be updated on an annual basis as part of the Joint Strategic Needs Assessment. 2010 data suggests that 4,370 children under the age of 16 are currently living in poverty in Herefordshire. Further detailed statistics are also available on the [Facts and Figures website](#).

The needs assessment examines child poverty by the impacts that it may have on the life chances of an individual under the themes of:

- The Money In My Pocket
- My Job Prospects
- My Education and Skills
- My Physical and Mental Wellbeing
- My House
- The Area In Which I Live
- Crime And disorder In My Area

Those areas of Herefordshire recording the highest levels of child poverty for children under 16 are Golden Post-Newton Farm and Leominster-Ridgemoor, both of which are mentioned consecutively within the theme areas studied.

Whilst employment is one of the most successful routes out of poverty, it is not a guarantee. A combination of low wages in low skilled jobs may limit total earnings. A child's risk of being in poverty falls from 58 per cent to 14 per cent when one or both parents is working; however, various constraints exist, not least transport costs to work and availability of affordable child care, which may prevent parents entry to employment. Herefordshire is fortunate in that unemployment rates are comparatively low with some 76.2% of all people in employment and just 5.3% unemployed. Comparative unemployment rates regionally and nationally are 9.3% and 7.9% respectively.

Whilst the county has a comparatively high employment rate, the average wage levels are much lower. This has an effect on people's circumstances as well as the economy as a whole and wealth of the county. A key factor in Herefordshire is the number of part time workers and especially female workers, who receive mean wages below both the regional and national averages. Insufficient income can be addressed through additional benefits, though availability of employment would create better opportunity for the individual and the economy. Poor development in childhood and negative experiences can impact on educational attainment and ultimately employability. Whilst the attainment of pupils

³ [Independent Review on Poverty and Life Changes](#)

⁴ [Early Intervention: Next Steps](#)

⁵ [Early Years: Foundations for life, health and learning](#)

eligible to free schools meals at key stage 4 has risen consecutively in recent years in Herefordshire, a gap still exists between these children and their peers. In 2010, this gap stood at 30 percentage points, slightly wider than the 28 percentage points recorded nationally.

Whilst it is true that the highest levels of child poverty are recorded in Hereford city and the market towns, poverty can be particularly prevalent in rural areas where it may be harder or more costly for families to access services and opportunities. People in the lowest income group in rural areas spend, on average, almost 50 per cent more than urban equivalents on transport. The Commission for Rural Communities (CRC) and the Rowntree Foundation have published research (2010) that shows that people in rural areas need to take home up to 24% more than those in urban areas in order to reach an acceptable living standard. For example, a single person living in a hamlet will need £18,600 a year to get by, compared with £14,400 for the same person living in an urban area.

Housing quality is one of the wider determinants of health, and poor housing conditions can trigger negative health effects and poor educational attainment in children. In Herefordshire, poorer housing conditions are more commonly found in the private rented sector, much of which is pre-1919 housing, and much of which is in the “hard to heat, hard to treat” category. Many rural dwellings in Herefordshire also lack a mains service infrastructure such as gas, water and drainage.

Proximity to services, both safeguarding and preventative as well as entertainment and play has a marked impact on families in rural communities. Young people in these areas are less likely to engage in after school activities, prevented from doing so by the time and money required to access these.

7. Performance Framework

A fundamental part of our approach is not to prescribe all the activities required to address child poverty, but to present the key issues facing Herefordshire in an informed, accessible way and to be clear about what Herefordshire Public Services will do for its part. The needs assessment and strategy have been developed in consultation with a variety of other organisations, including private, voluntary and community organisations.

It is important that, collectively, we focus on activity that has a strong track record of delivering change, whilst also enabling local innovation together. The strategy can be used by local partnerships, private, voluntary and community organisations to think what they can do to take part in addressing child poverty, to put thought into action and to pledge their involvement. We will collect these pledges and use them to assess how we are achieving our aims in Herefordshire.

8. Key areas of work

The strategy follows the needs assessment in setting out the key areas of our work. Each section establishes what we are aiming to achieve, why it is important and what we will do.

My House

What are we aiming to achieve?

For children in Herefordshire to live in safe, warm and healthy homes, thus contributing to maximising their positive health and educational life opportunities

Why is this important?

- The total cost of poor housing is calculated to be in excess of £600 million annually to the NHS, and the costs to society may be greater than £1.5 billion, per year.
- The House Condition Survey in Herefordshire (2006) indicated that over 9% of dwellings had serious Category 1 Hazards and over 40% failed the Decent Homes Standard. Most of these were in the private rented sector.
- Many homes in Herefordshire are “hard to heat, hard to treat homes”: expensive to heat.
- In 2008, 29.3% of Herefordshire residents were in fuel poverty (latest figures from DECC).
- Housing inspections reveal that damp and mould, excess cold, electrical safety, fire safety, risk of falls and overcrowding are common hazards found in Herefordshire homes.
- There is a shortage of affordable social housing in Herefordshire, with over 5,000 households on the waiting list (April 2011), most of them families. In addition, there are over 1900 empty properties (April 2010).
- Herefordshire has the worst affordability ratio in the West Midlands. This means that for those on lower earnings, a house at the bottom end of the market currently would cost them 9.3 times their annual earnings

What we will do?

- Improve housing conditions in all tenures (private rented, social, owner-occupied)
- Prioritise for action all referrals from partners, in relation to children in alleged poor housing conditions
- Continue to prevent illegal evictions & harassment of families by landlords.
- Work towards addressing overcrowding of homes in the county
- Provide disabled facilities/amenities for children in terms of access or egress within the home.
- Bring 390 empty properties back into use in Herefordshire by 2013
- Use the Joint Housing and Social Services protocol for early intervention where children are at risk of homelessness.
- Expand the Women’s Aid outreach support service to offer support to children living in the community affected by domestic abuse
- Work in conjunction with SHYPP to prepare a Teenage Parents Homelessness needs analysis.
- Set a target of 264 affordable housing (both built or acquired) to be delivered in what is still a fragile housing market.
- Continue the delivery of the National and Local Mortgage Rescue Scheme

Main partners for delivery:

Herefordshire Public Services – Homes and Community Services

My Physical and Mental Wellbeing

What are we aiming to achieve?

For every child in Herefordshire to have an equal chance of a healthy childhood and developing a healthy lifestyle for adulthood

Why is this important?

- Research suggests that the working-age obese may be 15-20% less likely to be in employment than the non-obese, all other things being equal
- Locally, in 2008-9 almost 1 in 10 children in Reception and nearly 1 in 20 children in Year 6 were obese
- Across Herefordshire estimated rates of binge drinking vary from 13.3% to 24.2% of the total population, averaging at 16.8% for the county
- ONS estimates indicate a correlation between higher levels of binge drinking and local areas of deprivation
- Central ward showed the highest under 18 conception rate in 2009 at 85.9 per 1000 girls aged 15-17, almost three times the county average of 31.2
- The simple act of a mother and father being interested in their children's education alone increases their chances of moving out of poverty as an adult by 25 percentage points
- Lower income mothers are less likely to breast-feed but those low income mothers who breast-fed for 6-12 months had the highest scores of any group on quality parenting interactions at age five.
- It has been shown that a reduction in income and worsening mental health tend to lead to a reduction in parenting capacity; however, increases in income alone did not necessarily improve parenting capacity.

What we will do?

- Promote safe alcohol consumption amongst children, young people and pregnant women thus supporting those that drink unsafe amounts
- Promote Start4Life programme across Herefordshire
- Provide breastfeeding support to new mothers
- Provide 8-13 year olds with information, advice and guidance on how to maintain health lifestyles, with particular emphasis on smoking and drinking alcohol
- Provide opportunities for active sport, play and leisure
- Understand the issues and needs of young people around sexual health and substance misuse (including tobacco and alcohol) and then improve the services we provide
- Provide support for sexually active young people across all localities within Herefordshire:

Main partners for delivery:

Herefordshire Public Services – Health and Wellbeing

Wye Valley NHS Trust

Herefordshire Public Services – Economic, Environment and Cultural Services

Early Years settings, schools and colleges

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My Education and Skills

What are we aiming to achieve?

For all young people in Herefordshire to realise their potential and achieve economic independence by:

- enabling all children to be given the best start in life
- raising aspiration
- reducing the gap in attainment for those young people in vulnerable groups
- reducing the number of young people aged 16-18 who are not in education, employment or training (NEET)

Why is this important?

- In 2010, the gap between those pupils eligible to free school meals who achieved 5 or more A*-C GCSE including English and Maths and those who were not was 30 percentage points.
- The gap in attainment is already evident when pupils are assessed in the Early Years Foundation Stage Profile at the end of the Reception year.
- In general, 18 year old labour market entrants are more likely to be in higher status jobs at 19 than 16 year old entrants.
- Skilled trade vacancies account for the greatest proportion of vacancies that were hard-to-fill due to a lack of skills in the labour market

What we will do?

- Expand the number of places available in the market for 2 year old free education through settings and childminders.
- Support early years settings to ensure smooth entry to school for children and provide clear transition documentation.
- Deliver accredited parenting programmes in groups and 1:1 in Children's Centres, together with family learning programmes, including work related skills
- Work with schools, colleges and providers to raise aspirations of young people and ensure pastoral support is available to enable them to achieve.
- Work with schools to identify early those learners most at risk of disengaging and becoming NEET.
- Ensure interventions occur when young people have been identified as at risk of being NEET.
- Develop programmes to raise intergenerational aspirations in targeted geographical areas
- Encourage work based learning across the county both in Key Stages 4 and 5.
- Ensure that future developments in Herefordshire are used to benefit the local community via the development of skills academies, e.g. in construction and retail

Main partners for delivery:

Early Years settings, schools, PRUs, sixth forms, colleges

Herefordshire Public Services – People's Services

Herefordshire Public Services – Economic, Environment and Cultural Services

My Job Prospects

What are we aiming to achieve?

For all people in Herefordshire to meet their potential through work by:

- breaking down individual barriers to work
- creating opportunity for employment
- boosting economic growth that in turn creates additional employment

Why is this important?

- Parental employment is the single biggest determinant of family income and living in a household where no adult is working puts a child at a 63 per cent risk of relative poverty.
- In a recent residents survey, 23% of respondents thought “Job Prospects” one of the most important factors of quality of life and 26% also thought it was one of the factors that most needed improving.
- Locally, one area is in the top 10% national decile for employment deprivation, Golden Post-Newton Farm.
- The highest levels of young people not in education, employment or training (NEET) are concentrated in the area south of the River Wye in Hereford City.
- A report by the Commission for Rural England found more than a quarter of parents interviewed in rural Children’s Centres did not feel that the childcare available locally adequately met their needs.

What we will do?

- Run basic skill and life long learning courses to gain confidence and skills to enter the workforce
- Work with schools to ensure that children and young people receive information, advice and guidance on their career options, specifically those young people identified as being at risk of becoming NEET
- Provide employment advice and guidance in Children’s Centres
- Raise the profile of apprenticeships within Herefordshire and ensure that the entitlement to apprenticeships is accessible to young people throughout Herefordshire.
- Encourage entrepreneurial skills within the county including running business booster programmes and training voucher schemes to enable small companies to take the next steps in their development and enter new markets

Main partners for delivery:

Herefordshire Public Services – Economic, Environment and Cultural Services

Herefordshire Public Services – Homes and Community Services

Herefordshire Public Services – People’s Services

Hereford Futures

The Money in my Pocket

What are we aiming to achieve?

For every young person in Herefordshire to manage their lives in a way that means they can achieve their potential by:

- equipping young people with the skills to manage their lives, including budgeting, bills, accessing support
- enabling people to make sound financial decisions in a legally operating market

Why is this important?

- Evidence from children shows that they will modify their own needs in response to their family's financial difficulties
- Latest published statistics show 13.6% of children in Herefordshire are living in poverty.
- Three areas in Herefordshire have over one third of children living in poverty; Golden Post-Newton Farm, Leominster-Ridgemoor and Leominster-Gateway
- Those areas with the highest proportions of pupils claiming free school meals also have the highest proportions of children living in poverty.
- Compared to both regional and national figures, the weekly work-based earnings of Herefordshire residents compares poorly and appears to be worsening
- Low income families are more likely to rely on the subprime finance market and/or illegal forms of money lending such as 'loan sharking'
- Locally, enquiries to CAB regarding debt in 2009-10 were up by 16% on the same point in the previous year – similar to trends regionally and nationally.

What we will do?

- Work with schools and colleges to assist them to deliver economic awareness education including budgeting, debt management, bank accounts and bills.
- Work with schools and colleges to identify sources of grants/ funding to ensure young people from low income families are not disadvantaged in education by an inability to pay for trips/ text books/ equipment.
- Work with the post 16 education providers in Herefordshire to ensure an equitable method of distributing the Government's new Bursary scheme:
- Provide pre-contract and post-contract advice on consumer credit matters through appropriate and targeted means
- Enforce consumer credit legislation in a proportionate manner in accordance with the council's prosecution policy
- Signpost individuals to appropriate forms of credit, credit advisors and providers
- Support vulnerable consumers and those with additional needs to resolve disputed credit agreements and credit brokerage issues at the earliest opportunity
- Publicise and encourage communities to use credit unions

Main partners for delivery:

Herefordshire Public Services – Economic, Environment and Cultural Services

Herefordshire Public Services – People's Services

Herefordshire Public Services – Health and Wellbeing

The Area in which I live, including crime and disorder

What are we aiming to achieve?

For all children in Herefordshire to feel safe, secure and confident by:

- working to reduce crime
- stimulating creativity and exploration in children and young people particularly through access to quality play groups and outdoor adventure.
- providing full access for children and young people, families to services.

Why is this important?

- A quarter of children living in rural England are living in poverty.
- The effects of geographical isolation on individuals and families is significant both in terms of financial impact as well as social interaction.
- Young people in rural areas are less likely to take part in out-of-school activities than children in urban areas, because of the disadvantage of fewer options and distance.
- NSPCC findings acknowledged significant challenges to delivering child protection services in rural areas with service users spread over a much wider geographical area making face-to-face delivery more difficult and expensive.

What we will do?

- Work with communities to take ownership of, and responsibility for, green spaces (eg South Wye Regeneration Partnership and the development of Belmont and Haywood Country Park as a community asset)
- Improve business capability, access to services and a range of benefits for residents through investment in the broadband infrastructure.
- Develop the play buildings project to improve the quality and range of play grounds in the county
- Provide access to leisure and swimming facilities at reduced rates for targeted groups
- Promote special campaign to encourage reading with children, including annual reading challenges and improved access to neighbourhood libraries
- Prevent young people from entering the Criminal Justice System by identifying issues at an early stage and offering appropriate support.
- Target resources on those offenders most at risk of re-offending and / or causing harm to the community.
- Raise awareness on internet safety, fire safety, road safety, drug and alcohol, social behaviour and healthy eating to years 5 and 6 through the Crucial Crew project.
- Increase the percentage of service users exiting drug treatment successfully.
- Work with community and voluntary groups to deliver community projects addressing a range of issues, including drug and alcohol misuse, access to services, and community engagement

Main partners for delivery:

Herefordshire Public Services – Homes and Community Services

Herefordshire Public Services – Economic, Environment and Cultural Services

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Herefordshire Public Services – People's Services

9. Gap analysis

Implementation of the strategy and the associated monitoring of progress will identify gaps where there is currently limited or no provision in place to address them. Parental capacity and aspiration has been one such area which is addressed in part through the strategy but which may require additional provision and focus in the future. Where gaps are identified, Herefordshire Public Services and partners will work together to address them.

10. Resources

There are no dedicated resources for work around combating child poverty. The pledges and actions outlined in this strategy are a combination of the work that individual services undertake that will contribute towards combating child poverty.

11. Monitoring Arrangements

Progress against the achievement of the strategy and identification of gaps will be assessed through the following ways:

- Reviewing progress quarterly against specific actions through the countywide partnership arrangements including The Herefordshire Partnership, The Health and Wellbeing Board, The Economic Development Partnership, The Schools Strategic Group and The Safeguarding Boards
- Reporting bi-monthly by Herefordshire Public Services on progress against those activities that contribute to the child poverty strategy through the Joint Corporate Plan.
- Reporting against a range of indicators in an annual report commissioned by the Children and Young People's Partnership Forum, chaired by the Director of People's Services.
- Running a series of workshops for partners through the Children and Young People's Partnership Forum focusing on case studies in each of the key areas of work
- Updating the child poverty needs assessment annually, as part of the Joint Strategic Needs Assessment. Then updating the strategy to ensure effective progress.

Strategic links – list of related strategies and reports

- Economic Development Strategy
- Housing In Herefordshire Strategy Action Plan 2011-2012
- Joint Herefordshire and Shropshire Housing Strategy (currently out for consultation)
- Healthy Housing Strategy (draft at present)
- Affordable Warmth Strategy
- Homelessness Strategy
- Empty Properties Strategy
- “Yes We Can” Plan 2011-2015
- Domestic Abuse Strategy
- Director of Public Health’s Annual Report
- South Wye Regeneration Partnership Action Plan and the action plans of the advisory groups
- NEET Strategy (in development)

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HEALTH AND WELLBEING BOARD

17 JANUARY 2012

Subject:	Public Health Transition Update
Presented By:	Sarah Aitken, Interim Director of Public Health

PURPOSE OF THE REPORT:

To update the Board on action to implement the Public Health reforms for Herefordshire.

The Government's response to the White Paper consultation was published in July 2011; regular updates on how the reforms will be implemented are now being published. A number of more detailed policy documents are being published, when more detailed transition planning can start.

This report updates the Board on action to implement the Public Health reforms for Herefordshire, including both our local reforms and the Health and Public Health White Paper changes. The report also provides an update on how we are ensuring resilience during the transition period.

Healthy Lives, Healthy People: National Policy Framework

Public Health Reform Updates covering five areas are being published:

Public Health Outcomes Framework

Public health England Operating Model (20 December 2011)

Roles of local authorities and the Director of Public Health (20 December 2011)

Public health finance

Workforce strategy

Regular Bulletins outline progress on the reforms and a series of regional visits have been organised to support the work on engagement

Chris Bull chairs the Public Health Engagement Group, which provides independent advice and challenge to the Department of Health on the process

Department of Health is working with local government to produce guidance on director of public health appointments, including recruiting to vacant posts to ensure they are fit for purpose for the future

Shadow local authority allocations for public health funding for 2012/13 will be issued in December

Public Health Transition in Herefordshire

Responsibility for the health of the population and Director of Public Health is transferred to Herefordshire Council

Plan in place to improve health outcomes for residents

Update:

Assurance visit by Regional Director of Public Health held on 24 October 2011

Director of Public Health

Herefordshire Public Services response to the consultation on the public health white paper March 2011

Director of Public Health and staff integrated into structure of new HPS People Services Directorate April 2011

Consultant in Public Health on HHCC Shadow Board

West Mercia Public health network risk assurance framework developed and updated quarterly, most recent update 15 September 2011

Public Health Transition Plan to be published by March 2012

Appointment of DPH

MEETING:	HEALTH AND WELLBEING BOARD
DATE:	17 JANUARY 2012
TITLE OF REPORT:	HEALTH AND WELLBEING BOARD WORK PLAN
REPORT BY:	HEALTH AND WELLBEING GRANTS AND PARTNERSHIP OFFICER

CLASSIFICATION: Open

Wards Affected

County-wide

Purpose

To consider the current Work Plan.

Recommendation(s)

THAT the Board review the Work Plan and amend it as necessary

Introduction and Background

1 The current Work Plan is appended.

Background Papers

- None identified.

Further information on the subject of this report is available from Clare Wichbold, Health and Wellbeing Grants and Partnership Officer, on 01432 347661

HEALTH AND WELLBEING BOARD OUTLINE WORK PLAN JANUARY 2012

MEETING	AGENDA ITEMS	LEAD
21 February (W)	<p>Reflection on progress</p> <ul style="list-style-type: none"> • Review draft vision, and guiding principles • Scoping of priorities for 2012/13: <ul style="list-style-type: none"> ○ Children ○ Alcohol ○ Older People • How does the HWBB engage partners to deliver the Alcohol Harm Reduction Strategy? • Public Health Outcomes Framework/NHS Outcomes Framework/establish any local additions 	InLoGov
20 March	<p>Strategy & Development</p> <ul style="list-style-type: none"> • Approve vision, guiding principles and priorities for 2012/13 • Agree Health and Well Being Strategy 2012/13: <ul style="list-style-type: none"> ○ Alcohol Harm Reduction Strategy ○ Transformation of Older People's Services • Receive Public Health Transition Plan • Receive final QIPP Plan <p>System Leadership</p> <ul style="list-style-type: none"> • Commissioning cycles sign off • Approve Communications Plan 2012/13 <p>Updates</p> <ul style="list-style-type: none"> • HPS Update • CCG Update • HWBB Outline workplan • Learning Set Update 	SA SA/JD Simon Collings
17 April (W)	Workshop: 2012 emerging findings	SA Richard Beavan-Pearson DT AW CW JN InLoGov

	<ul style="list-style-type: none"> Health and wellbeing strategy: performance management process Governance, membership and working practices Needs assessment (INA update) 	Alison Talbot-Smith
15 May (incomplete)	<p>Strategy & Development</p> <ul style="list-style-type: none"> Receive INA Agree membership Update on children's priority <p>System Leadership</p> <ul style="list-style-type: none"> Safeguarding: report on activities and relationship with the HWBB 	SA JD
12 June (W)	<p>Updates</p> <ul style="list-style-type: none"> HPS Update CCG Update Learning Set updates HWBB Outline workplan Communications update: <ul style="list-style-type: none"> First annual report 	DT AW JN CW DT
10 July	<p>Strategy & Development</p> <p>System Leadership</p> <p>Updates</p> <ul style="list-style-type: none"> HPS Update CCG Update HWBB Outline workplan Learning Set Update Communications update 	DT AW CW JN
4 September (W)		
16 October	Strategy & Development	

	<p>System Leadership</p> <p>Updates</p> <ul style="list-style-type: none"> • HPS Update • CCG Update • HWBB Outline workplan • Learning Set Update • Communications update 	DT AW CW JN
13 November (W)		
11 December	<p>Strategy & Development</p> <p>System Leadership</p> <p>Updates</p> <ul style="list-style-type: none"> • HPS Update • CCG Update • HWBB Outline workplan • Learning Set Update • Communications update 	

Notes:

1. (W) Denotes Workshop
2. Scheduling is indicative in some cases and will be firmed up as part of the joint agenda planning work
3. Work Plan will be updated each month
4. Initials against items in column 3 are for members of HWBB; other contributors are named in full.

