



Subject:	Consultation response on the Public Health Agency's corporate plan
Date:	7 February 2017
Reporting Officer:	Nigel Grimshaw, Director City & Neighbourhood Services Department
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Is this report restricted?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Is the decision eligible for Call-in?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

1.0	Purpose of Report or Summary of main Issues
1.1	The purpose of the report is to present the draft response to the Public Health Agency's (PHA) corporate plan for Members to consider and agree. The full draft corporate plan is in Appendix 1 and the compiled response is in Appendix 2.
2.0	Recommendations
2.1	The Committee is asked to; <ul style="list-style-type: none">• Consider and agree the draft response to the PHA corporate plan.
3.0	Main report
3.1	The PHA is seeking views on its draft Corporate Plan 2017 – 2021.
3.2	In summary its purpose, vision and values are to 'protect and improve the health and social wellbeing of our population and reduce health inequalities through strong partnerships with individuals, communities and other key public, private and voluntary organisations' by placing individuals and communities at the heart of it who we will listen to and involve openly and honestly whilst working in partnership to improve the quality of life of individuals and communities. Valuing and empowering staff to deliver evidence led and outcomes-focused services.
3.3	We welcome the high level direction of travel and outcomes prioritised in it and its straightforward presentation in the draft corporate plan. Our full response (appendix 2)

provides the specific commentary we encourage for the best fit to our aspiration in the draft Belfast Agenda and in response to the latest Programme for Government consultation.

3.4 The consultation seeks feedback to the corporate plan vision generally and any gaps or opportunities for incorporation. It names 4 main priority outcomes for action in the corporate plan as:

- Outcome 1: All children and young people have the best start in life
- Outcome 2: All older adults are enabled to live healthy and fulfilling lives
- Outcome 3: All individuals and communities are equipped and enabled to live long healthy lives
- Outcome 4: All health and wellbeing services should be safe and high quality

3.5 A summary of specific feedback follows in the key issues section of the report:

Key issues

3.6 We agree generally with the direction of travel in the corporate plan to promote health and social wellbeing where everyone is the heart of it and there is a focus on addressing health inequalities. We recommend going further to add a value in it to aspire to 'local people shaping and co-producing the services they require'. We encourage PHA that when listening to individuals and communities that this should also cover families/ or agreed advocates/ appointed professional representatives (e.g. educator, social worker, hub co-ordinator etc) for individuals to be effectively represented.

3.7 The main question in the consultation is whether or not you agree with the direction of travel, each outcome and any gaps or suggestions. Table 1 summarises the main feedback in our response to the suggested outcomes:

Table 1: Summary of main feedback on each Outcome

1. All children and young people have the best start in life?

We welcome that CYP getting the best start in life is a prioritised outcome and reflects our thinking in the Belfast Agenda. We recognise the items which promote the best start in life are generally the *universal rights of the child and worth referencing in this way.*

Furthermore we reinforce the need to recognise:

- There is an evidenced need to prioritise CYP with *complex needs, experiencing 'multiple adversity' or those most at risk*, particularly when assigning services or tailoring intervention or funding streams.
- The evidence of the impact of child poverty *and* key transition stages in a child's life.

- A flexible approach to commissioning and programming to reflect the diverse 'family' experience to enable other 'informal kinship' arrangements e.g. grandparents or in cases where there are child carers to be effectively addressed in service provision.
- *Building on our existing relationship with PHA to broaden collaboration with the Department of Education in the next PHA corporate.*
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2. All older adults are enabled to live healthy and fulfilling lives? If not, what alternative do you suggest?

We welcome the prioritisation of this outcome and the focus on dementia and using technology based approaches to promote independent lives throughout older age. Furthermore we recommend the outcome references 'active' ageing i.e. 'All older adults are enabled to live healthy, *active* and fulfilling lives'.

- We support the activity listed like healthy ageing programmes, mental health interventions, immunisations and screenings to deliver the outcome. The Belfast Health ageing action plan and key priorities remain current and we recommend are a key focus for this investment.
- We seek an agreed definition of an older person is applied and support prioritising the needs of individuals with complex needs, dependencies and/ or multiple adversities and the right for an older person to be free from elder abuse.
- Prioritising and promoting timely interventions for adults to manage or maintain their health or implications of life choices at the optimum time using evidence to identify this and flexibly target when interventions are made.

3. All individuals and communities are equipped and enabled to live long healthy lives?

We positively reinforce the need to ensure adults with complex needs or differing abilities to be prioritised in this section. We are keen to highlight the priority need for drug and alcohol misuse to be prioritised in the actions underpinning this outcome to ensure there is co-ordinated information and materials and interdependence its impact has on behaviours or life choices and overall personal or community impact. Members recent concerns around the investment and delivery of mental health services and drug and alcohol addiction services in the Belfast trust areas particularly resulting in long waiting time for referrals or the adequacy of wraparound community support services in neighbourhoods that need it most is referenced and our ambition to work better in partnership to achieve joint service delivery in NHB settings

- We welcome the opportunity to consolidate partnership work to plan and enable

healthier communities. Achieving this collaboratively through the planning processes to improve the city's environment specifically our green spaces and using our services as a mechanism to disseminate messages on healthy lifestyles.

- We repeat the need for specific references as in outcome 1 and 2 for priorities to be identified within of those with disabilities, those at risk of harm or abuse, with complex needs, dependencies and/ or multiple adversities for access to universal and intervention services.
- The wider impact of poor health or inequalities is reflected and that the range of initiatives we already have in place like 'Belfast Works', Belfakes or community gardens and allotments as part of our Growing strategy may be scalable to fit the integrated whole life approach to person centred services to positively impact lives.
- Building resilience is key particularly as we reinforce the need to address the *interdependent nature of drugs and alcohol misuse particularly as it impacts, the individual, families, communities and the public safety.*

3.8 Generally comments reinforce the need for proportional investment in services through integrated business planning to overcome Trust/ Council boundaries. We encourage ongoing collaboration connecting with our social and community engagement models e.g. Neighbourhood Renewal; Youth Forum or the Healthy Ageing Strategic Partnership etc and through our strategic partnership with GLL to improve the health outcomes for our citizens.

3.9 In applying an outcomes based approach and person centred services these should identify those in greatest of need irrespective of age however we urge caution to ensure the needs of all the groupings under section 75 of which age is a single identity are addressed too.

3.10 We have drafted an ambitious 'Belfast agenda' as our community plan which is based on our belief that we will invest to save through inclusive growth (via City Deal or other opportunities) which benefits everyone. Through the regeneration of our city centre, building jobs and employability and a thriving economy we aim to have a vibrant and attractive city with safe and well connected neighbourhoods. We are lobbying to ensure the necessary powers are devolved for us to achieve this and successfully build local growth in our neighbourhoods.

3.11 We have set an ambitious target to reduce the life expectancy gap by 50% in Belfast by 2035 from the most and least deprived wards which requires us to think and operate differently to achieve it. It means tackling the root causes of poverty and its impact on the individual, family or community. We recognise that sustainable regeneration of people and

	<p>the place in which they live needs to be delivered successfully. We are currently considering how the complex interdependent nature of these issues that compound poverty are addressed through a future neighbourhood regeneration model and welcome an integrated approach with our partners to deliver this.</p>
3.12	<p>We seek to strengthen existing joint working arrangements (e.g. Belfast Strategic Partnership through the Making Life Better' strategy etc.) and with PHA to deliver these priorities with the trust and PHA and other key partners for co designed resource allocation which invests in preventive models for health inequalities, particularly for mental health and wellbeing.</p> <p><u>Next steps</u></p>
3.13	<p>Members are asked to consider and agree the draft response to the PHA corporate plan.</p> <p><u>Financial & Resource Implications</u></p>
3.14	<p>None associated with this report.</p> <p><u>Equality or Good Relations Implications</u></p>
3.15	<p>None associated with this report.</p>
4.0	Appendices – Documents Attached
	<p>Appendix 1: PHA draft corporate plan</p> <p>Appendix 2: Belfast City Council draft consultation response</p>