

**Joint Meeting of Scrutiny Committees**

**January 17<sup>th</sup>, 2008**

**Report by the Director of Social Services and Housing**

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**Draft Health, Social Care & Well-Being Strategy 2008-11**

**1.0 Purpose of the Report**

- 1.1 To inform members of the development of the Health, Social Care & Well-Being Strategy 2008-11
- 1.2 To seek members views of the Joint Scrutiny Committee on the draft Health, Social Care & Well-Being Strategy 2008-11 as part of the consultation.

**2.0 Executive Summary**

- 2.1 Section 40 of the National Health Service (Wales) Act 2006 (the 2006 Act) provides for a duty to be placed on each Local Health Board (LHB) and Local Authority (LA) in Wales to jointly formulate and implement a strategy for the health and well-being of its local population, and to have regard to that strategy in exercising their functions.
- 2.2 The main requirement for the second round of the HSCWBS will be that in each area the agreed strategy, and, within the context of Designed for Life and Fulfilled Lives, Supportive Communities:
  - (i) Presents a consolidated vision of what the statutory partners with others expect success to look like in March 2011; and
  - (ii) Acts as the commissioning context for the statutory agents in using their resources jointly to achieve this vision.
- 2.3 The strategy must deliver demonstrable improvements in health and well-being, and streamlined and effective health services and social services.
- 2.4 The first draft strategies were developed by the end of March 2004, and following public consultation were adopted by Local Authorities, Local Health Boards and many local partners by the end of December 2004. The strategies became operational from 1 April 2005 to cover the 3 year period 2005-2008.
- 2.5 The development of the second round of Health, Social Care and Well Being Strategies is an opportunity to further strengthen collaboration and integration between all local partners, both statutory and non-statutory, with the aim of significantly improving the health and wellbeing of the people of Denbighshire.

- 2.6 In anticipation of the second round of Health, Social Care and Well-being Strategies in April 2008, the Welsh Assembly Government reviewed and revised the Statutory Guidance and made amendments to the Existing Regulations.
- 2.7 The main changes to the Existing Regulations include changing the operative period of the strategy from five years to three years and removing the need for a separate consultation on the Needs Assessment.
- 2.8 Following plan rationalisation, which reviewed the statutory plans that Local Authorities and partners are required to produce, only four remain: (i) the Community Strategy; (ii) the HSCWBS; (iii) the Children and Young People's Plan (CYPP); and (iv) the Local Development Plan.

Each of these plans are to develop appropriate links through cross-referencing and summarising of key points. Where necessary, there can be duplicate content in the two plans (HSCWB and CYPP) to ensure full clarity as to intentions and intended actions.

- 2.9 **The statutory guidance *Health, Social Care and Well-being Strategies (Wales) (Amendment) Regulations 2007* that came into force on the 1<sup>st</sup> April 2007 states that a formal public consultation on the draft Health, Social Care & Well-Being (HSCWB) Strategy document must run for a minimum of 12 weeks.**
- 2.10 The Community Services Framework will be an appendix of the HSCWB Strategy.
- 2.11 The Health, Social Care & Well-Being Strategy 2008-11 is to be published on the internet by March 31<sup>st</sup>, 2008 in order to be implemented and performance managed as of April 1<sup>st</sup>, 2008.

### **3.0 Consultation Carried Out**

- 3.1 The formal public consultation phase of Denbighshire's Health, Social Care & Well-Being Strategy took place between October – December 2007. The deadline for public consultation responses was December 31<sup>st</sup>, 2007.
- 3.2 Significant engagement work took place in advance of the formal consultation phase to ensure that the consultation was meaningful and appropriately managed. Particular consideration was given to those organisations and groups previously identified within the HSCWB statutory guidance and a cross-referencing system was used to track progress and identify any gaps.
- 3.3 The draft Health, Social Care & Well-Being Strategy has been distributed widely throughout the county (and beyond) electronically and in hard copy and was also available on the Health, Social Care & Well-Being website ***healthydenbighshire.co.uk*** to download.

- 3.4 A number of successful joint events have been held including those with Conwy Health, Social Care & Well-Being Partnership and Community Safety Partnership; Denbighshire Children and Young People's Partnership; Supporting People and Want 2 Work. (Further information on the full range of consultation activities can be made available).
- 3.5 Innovative approaches have been developed in preparation for the consultation phase and to be continued during the implementation of the strategy; a dedicated Health, Social Care & Well-Being Partnership website; the use of a PIN PaC (Public Involvement Network Promote & Cascade Electronic information pack) and 'Ceri's Family' (a hypothetical family that illustrates health and social care issues and services available or in development within Denbighshire. 'Ceri's Family' has been endorsed by the Children and Young People's Partnership and Community Safety Partnership and will be further developed as a 'Denbighshire Partnership Family'.)

#### **4.0 Implications on Other Policy Areas**

As the Health, Social Care & Well-Being Strategy is broad ranging it will impact in varying degrees upon other policy areas.

#### **5.0 Recommendations**

- 5.1 That members review and make comment on the draft Health, Social Care & Well-Being Strategy with a view to recommending endorsement by Full Council in February 2008.

#### **6.0 Background Papers**

- Health, Social Care and Well-being Strategies (Wales) Regulations 2003 (SI 2003 No 154 (W.24))
- Health, Social Care and Well-being Strategies (Wales) (Amendment) Regulations 2007
- Review of Health and Social Care in Wales, Derek Wanless Report
- Health Challenge Wales
- Designed for Life
- Fulfilled Lives, Supportive Communities
- Making the Connections
- Making the Connections - Delivering Beyond Boundaries
- Denbighshire Health Social Care & Well-Being Needs Assessment March 2007
- Denbighshire Health, Social Care & Well-Being Strategy 2005-2008
- Community Services Framework April 2007

**All papers available on [healthydenbighshire.co.uk](http://healthydenbighshire.co.uk)**

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# Denbighshire Draft Health, Social Care and Well-Being Strategy 2008-2011

**For Consultation Purposes Only**

**Consultation Phase October 07- December 07**

## Introduction

This Strategy is for Denbighshire citizens of all ages who live, work and visit Denbighshire. It is about where we live, how we live and how healthy we are. It tells you about what has been done and what is being done to improve our lives and to reduce inequalities in health.

Deciding what matters in 2008-2011 is about setting priorities and we have identified eight overlapping sets of priority 'Themes' that affect all of us. These are wide ranging because our health, social care and well-being are affected by lots of influences such as our health in childhood, our education, our homes, our incomes, our ethnic group and identity, our support networks and where we are in each stage of life.

We came to decisions about what matters in Denbighshire by two routes:

1. A Needs Assessment document that pulled together lots of information about our lives and circumstances; and
2. An underpinning value base that hinges on building and sustaining:
  - safe communities and trust
  - programmes designed to promote our health, independence and enjoyment of life
  - our active participation in creating better lives and communities
  - our personal decision-making and accountability
  - economic well-being;
  - a competent workforce, getting the most out of technology and other resources, and attuned to the importance of providing services in ways that respond to ethnic group, gender and other differences.

Each of the 8 Themes is divided into 4 parts:

- ◇ **Theme Meaning** – developed by a range of stakeholders and is unique to Denbighshire
- **How does this fit with what we know?** - this is based upon information from the 2007 Health, Social Care & Well-Being Needs Assessment
- ☆ **What have we done so far?** - a highlight of progress so far taken from the 2007 Health, Social Care & Well-Being 'Making A Difference' Achievements Report
- ◁ **What are we going to do in the next 3 years and what this may mean to you?** – strategic objectives to be delivered by a range of partners and examples of what these may mean to you

Further information is available on the new Health, Social Care & Well-Being Partnership website [www.healthydenbighshire.co.uk](http://www.healthydenbighshire.co.uk) or download the Health, Social Care & Well-Being Information Pack (PiN PaC) which will answer most of your questions about the Strategy – if it doesn't please let us know!

Available in large print or audio upon request

**Health, Social Care & Well-Being Team at 01824-708-363**  
**[hscwb.admin@denbighshire.gov.uk](mailto:hscwb.admin@denbighshire.gov.uk)**

**Please take part in this consultation and let us know what you think about Denbighshire's priorities – become our co-writers – and play a part in shaping our future!**

Feedback will be available on our website Feb 08  
[www.healthydenbighshire.co.uk](http://www.healthydenbighshire.co.uk)

**The consultation responses will then be taken into consideration and the revised Health, Social Care & Well-Being Strategy 2008-11, will be published on [www.healthydenbighshire.co.uk](http://www.healthydenbighshire.co.uk) on March 31<sup>st</sup>, 2008 to be implemented and performance managed as of April, 2008.**

Thank you for your involvement in helping us to make a difference!

# What matters in Denbighshire?

## 1. REDUCING POVERTY & IMPROVING SOCIAL INCLUSION

### ◇ *What does this mean?*

By *Reducing Poverty and Improving Social Inclusion* we mean we will do everything we can to reduce poverty. It means we will make sure that people who are disadvantaged are given the opportunity to be included in activities which are taken for granted by most of us. All Denbighshire residents have a right to the following: enough income to meet basic needs (such as food, housing, warmth and health care), equal access to all of our services such as education and leisure services; equal access to employment; to be involved in their community and to have a say in decisions about how local resources and services are allocated.

We recognise that many people in Denbighshire may not have these rights and that certain groups and communities are more affected by poverty than others; and not having these rights means that people are not treated equally or are less involved in their local democracy. It includes people who may be geographically isolated in rural communities and not visibly concentrated in particular neighbourhoods. It also means people who are socially excluded – unable to gain access to quality housing, education, transport and to fully participate in society. It matters that in Denbighshire we bring new energy to regeneration efforts to work with people at the far end of the spectrum of inequality and revitalise our rural and urban communities.

### □ *How does this fit with what we know?*

- The main underlying factor that explains observed differences in health status between individuals is social disadvantage and poverty (World Health Organization, WHO)
- Disadvantage can include having few family assets, a poor education during adolescence, insecure employment and living in poor housing
- Poor socio-economic circumstances can lead to anxiety, insecurity, low self-esteem, social isolation and lack of control over work and home life
- It can also increase risk-taking behaviour such as smoking, alcohol misuse, drug taking and unsafe sex. Poverty also stops people gaining access to quality housing, education, transport and to fully participate in society

- Social isolation and exclusion are associated with increased rates of premature death and poorer chances of survival after a heart attack. These can also lead to a higher risk of divorce and separation and substance misuse - all of which affect health and well-being
- There is a clear link between poor housing and stress related illness with people on low incomes being more likely to live in poor housing
- Poor housing has been linked to increased levels of limiting long term illness, respiratory and infectious diseases, injuries, perceived poor general health and even increased mortality

## ★ *What have we done so far?*

### **We have:**

- Developed 134 affordable housing units for rent and sale, in partnership with Registered Social Landlords
- Focused energies on the prevention of homelessness resulting in 113 individuals, couples and families avoiding being placed in temporary accommodation for homeless people
- Denbighshire Welfare Rights Service has helped thousands of local people gain a total of £7.4 million in extra social security benefits and tax credits (2006-2007),
- £58.5 million in extra social security benefits and tax credits over the past 11 years
- Opened 2 Integrated Children's Centres – 1 in Rhyl and 1 in Denbigh
- Secured *Inequalities in Health* project funding to reduce inequalities for the most disadvantaged. Four communities in Rhyl are participating in the Rhyl Leisure Passes Scheme
- Secured a European Objective One Grant of £200,000 with the Disability Forum, Job Centre Plus and the Voluntary Services Council to support people experiencing disadvantage in training and employment. Over a three year period the grant has helped support people with physical and sensory impairments and young people leaving care
- Re-introduced an annual rough-sleeper count
- Appointed a County Council Homelessness Champion
- Created a multi-agency panel to develop housing pathways for younger people, most particularly those leaving care
- Ensured the involvement of the Older People's Strategy in *GOFAL* which provides support and advice to older people who are at risk, vulnerable and/ or isolated

- Established links with the North Wales Racial Equality Network with a view to enhancing service provision to Black and Minority Ethnic citizens

### ◁ *What are we going to do in the next three years?*

- ✓ Work towards reducing the incidence of poor health as a consequence of poverty
- ✓ Work towards reducing fuel poverty
- ✓ Work towards reducing financial poverty
- ✓ Remove 50% of children from poverty by 2010
- ✓ Reduce poor housing, improve extent of affordable housing and monitor homelessness
- ✓ Improve access to training and employment for disadvantaged groups
- ✓ Encourage all service providers to consider how the actions in reports and business plans help reduce poverty
- ✓ Promote equality of access to services for all individuals and communities
- ✓ Raise awareness of poverty, improve local mapping and review progress on reducing poverty
- ✓ Increase the opportunities for the people of Rhyl to access suitable employment

### ◁ *What might this mean for you?*

**Welfare Rights Advice Services will help people secure an extra £7million worth of social security benefits and 'in work' tax credits per year**

**We will through the Rhyl Cities Strategy, help an additional 800 people into sustainable jobs by 2010**

**60 people with physical impairments and 25 care leavers will be supported in pursuing training, volunteering and employment opportunities**

**25 additional work placements will be found through the Job Finding Service for people with learning disabilities**

## 2. OUR ENVIRONMENT

### ◇ *What does this mean?*

By *environment* we mean our natural, physical surroundings: the combination of the sea and mountains, the soil, water and air, as well as our *built landscape* which is made up of our houses, places of work, schools and colleges, retail and commercial developments, places of worship, libraries, as well as our roads and transport systems. It also means wanting to feel safe in our environment and not live in fear of crime. Our environment of urban and rural spaces matters because these can all have a profound effect on our health and well-being.

### □ *How does this fit with what we know?*

- Global problems have local implications. As our activities can inflict harsh damage on our environment, we have to take action to protect ourselves and future generations by living and working sustainably
- It is recognised that environmental damage by air, water and soil pollution can pose problems for peoples' health
- Extreme cold and extreme heat can seriously damage our health. Solar radiation is the main cause of skin cancers and in the winter months vulnerable people are at increased risk of getting hypothermia, influenza, of tripping and falling
- Household, commercial, recreational and industrial wastes are the general sources of community waste. The task of waste disposal is important and costly, most particularly in areas with high concentrations of tourist activities and natural attractions. Improper waste disposal spoils Denbighshire
- A lot of older people are owner occupiers living in older properties which are likely to be in disrepair
- Poor housing damages our health. Further, the stress of being in temporary housing impacts on people's health with high rates of accidents to children
- The potential health damaging and health promoting effects are numerous. For example, the location of shops selling affordable fruit and vegetables can determine access to a healthy diet.
- Transport difficulties are a major barrier to access a range of care services and other public services, employment and healthy diet. However, vehicles cause both noise and air pollution, road traffic accidents and may deter people from cycling and walking
- High levels of workplace stress have been linked to an increased risk of physical injuries at work, high blood pressure, cardiovascular disease, depression and other mental health conditions, and increases in negative personal health practices such as smoking and drinking

## ☆ *What have we done so far?*

### **We have:**

- Invested in the North Hoyle Offshore Wind Farm which creates enough renewable energy to supply some 40,000 homes with electricity
- Worked with the Environment Agency Wales, prepared a Local Development Plan and adopted a *precautionary framework* to guide planning decisions away from areas thought to be at high risk of river, tidal and surface water drainage flooding
- Secured Heritage Lottery Funds as part of the Heather and Hillforts Landscape Partnership Scheme to improve important environmental assets
- Received an award for the County Council's green fleet of vehicles which use fuel made from recycled vegetable oil from restaurants, schools and hotels
- Developed an award winning Night Rider pilot scheme providing older people with a reliable, low cost, evening transport service run by volunteers
- Received funding from the Welsh Assembly Government for a pilot transport scheme offering half price fares for 16-18 year olds
- Increased the current waste collected for recycling and composting by promoting a kerbside waste collection service for two or more recyclables to 55% of Denbighshire households
- Assisted 125 Denbighshire applicants to undertake housing improvements through the *Houseproud Scheme* offering loans and assistance in arranging repairs for home owners aged 60+ and disabled people
- Promoted an affordable warmth strategy for Denbighshire identifying and improving 'fuel poor' homes

## ◁ *What are we going to do in the next three years?*

- ✓ Through the Local Development Plan (LDP) ensure that full account is given to the principles of sustainable development, including ensuring that the scale, type and location of all new development takes full account of economic, environmental and social issues both for current and future generations
- ✓ Negotiate affordable housing opportunities where appropriate, including specialist accommodation such as for disabled people, extra care housing and to investigate gypsy and traveller needs
- ✓ Seek to ensure that rural villages are sustainable, with good quality facilities, shops and services

- ✓ Seek to ensure that there is sufficient access to improved public open space and children's play space
- ✓ Increase the range of housing advice and housing options for young people and improve young people's appreciation and awareness of their environment
- ✓ Provide specialist housing support for substance misusers
- ✓ Ensure statutory responsibilities relating to the environment continue to be met
- ✓ Provide a model of housing and care across Denbighshire that enables older people to live as independently as possible, for as long as possible, whilst feeling safe and supported
- ✓ Improving housing conditions in the social and private sectors working towards Welsh Housing Quality Standards

### ◁ *What might this mean for you?*

**Development of a Young Person's Housing Panel to consider the accommodation and wider needs of care leavers**

**Development of Extra Care Supported Housing – 59 units in Rhyl, 61 units in Prestatyn, 24 units in Ruthin**

**Employment of an Environment Warden to provide a swift response to instances of criminal damage and provision of 200 community clear-up events per year**

**To ensure all windows and doors and heating systems in Council properties are up to a necessary standard**

## 3. POSITIVE LIFESTYLES

### ◇ *What does this mean?*

By *Positive Lifestyles* we mean ways of doing things – our behaviour, practices and habits – that result in our feeling and being as healthy as possible, no matter how old we are or whether we are currently experiencing, or have had, experience of physical and mental health problems. It also refers to the sense of having a purpose and significance and sense of belonging.

### □ *How does this fit with what we know?*

- An active child is more likely than an inactive child to become an active adult
- Activity is associated with the prevention and management of a range of conditions such as coronary heart disease and strokes
- Lifestyle and occupational choice influence our physical and mental well-being
- Many diseases and injuries are preventable and lifestyle choices such as regular physical activity, nutrition, adequate sleep, practising safe sex, the avoidance of stress, tobacco and excessive alcohol use can improve our health and increase our life span
- The effects of an unhealthy lifestyle are cumulative and may have the greatest impact later in life
- We have to pay attention to the social and environmental conditions that enable us to make responsible lifestyle choices
- There are health benefits to having the support of strong family and/or friendship networks
- There are health gains for communities when we take collective action for ourselves and others
- Making healthy lifestyle choices can be increasingly difficult for those who may have limited resources to follow a healthy diet or to access leisure facilities

### ☆ *What have we done so far?*

#### **We have:**

- 52 Denbighshire schools committed to the *Healthy Schools Scheme*
- Ensured that 98% of looked after children were registered with GP's, Dentists and/or Opticians and 75% had their teeth checked by dentists in a 12 month period

- The *Nutrition in Youth Clubs Project* has targeted 2,142 young people and has collaborated with Rhyl Football Club whose players have become health and fitness role models for young people
- Appointed 12 Champions for Health Challenge Denbighshire
- In 2006 1467 people participated in our *Footloose: Walking the Way to Health* walks in Denbigh and Rhyl
- Prepared a Healthy Ageing Action Plan, which is linked to a Sexual Health Action Plan
- Received Cymorth funding for a fixed term Public Health Practitioner Post - Healthy Sexuality post which is hosted by National Public Health Services (NPHS)
- Appointed a 50+ Physical Activities Coordinator who has overseen a selection of activities at each of the main leisure centres in Denbighshire
- Offered a series of *Cook and Eat* sessions and workshops to promote healthy eating and cooking for one
- Involved service users and family caregivers in the Partnerships Boards for the Older People's Strategy, Mental Health, Disability Integration, Community Equipment Service Integration, Telecare and the Community Occupational Therapy Partnership

### ◁ *What are we going to do in the next three years?*

- ✓ Provide counselling and therapeutic services to children and young people with social, emotional and behavioural difficulties including Child & Adolescent Mental Health Services (CAMHS)
- ✓ 100% schools engaged in Denbighshire Healthy Schools scheme by 2010 – to be supported with training, resources and networking to implement action plans
- ✓ Identify priorities to reduce childhood injuries
- ✓ Implement joint action plans between Conwy and Denbighshire: Conwy and Denbighshire Immunisation Action Plan to increase vaccine uptake; Conwy and Denbighshire Breastfeeding Action Plan to increase breastfeeding rates
- ✓ Implement Denbighshire specific actions plans: Active Lifestyles Action Plan, Nutrition Action Plan, Sexual Health Action Plan, Tobacco Action Plan
- ✓ Develop and implement a joint Conwy and Denbighshire Obesity Strategy
- ✓ Promote a Harm Reduction approach to work with people who misuse drugs and alcohol
- ✓ Further work to prevent re-offending and introduce support systems promoting improved lifestyles, wellbeing and future planning

- ✓ Denbighshire County Council will continue to work towards becoming a Health Improvement Agency
- ✓ Improve the health and well-being of the people of Denbighshire through Health Challenge Denbighshire
- ✓ Support the work of the Community Safety Partnership

◁ *What might this mean for you?*

**Easier access for children and young people to Child & Adolescent Mental Health Services (CAMHS)**

**Continue to support and encourage more people to quit smoking**

**Community Safety Partnership will fund up to 1000 young people each year to visit Danger Point interactive safety centre**

**Develop special housing scheme for learning disabled people with complex needs**

**Encourage more people to take up the flu vaccine**

## 4. EARLY INTERVENTION & CRISIS SUPPORT

### ◇ *What does this mean?*

By *Early Intervention and Crisis Support* we mean offering as much timely assistance as possible before difficulties pile up, combine and overwhelm our problem-solving resources. As not all risks, avalanches of problems, and abrupt changes in our circumstances can be avoided, some specialist supports are provided at the time that they are urgently required e.g. Accident and Emergency. At such times, the pressure to take decisive actions to stabilise a situation increases. Early intervention for crises with slow fuses, as well as crisis support, matter in Denbighshire because we recognise that crises of all dimensions are part of life and that they require protective measures and assistance at the earliest opportunity.

### □ *How does this fit with what we know?*

Prevention and early intervention are key to improving and sustaining a person's mental and physical health and well-being. As an early implementer site Conwy & Denbighshire Health & Social Care Community will be leading the way in developing and implementing the Delivering Emergency Care Strategy (DECS) with the aim of improving patient pathway and experience of unscheduled and emergency care across health and social care.

### ☆ *What have we done so far?*

#### **We have:**

- Appointed a Carers' Commissioning Officer
- Developed a range of interventions to minimise drug and alcohol misuse e.g. the Proof of Age scheme for young people buying alcohol
- Circulated alcohol awareness leaflets for older people via the Older People's Strategy
- Appointed an Intermediate Care Manager
- Agreed a budget for the first phase of the Intermediate Care Development Plan which includes the development of a Crisis Response Service
- Provided 2275 items of equipment and aids to enable people to remain in their own homes. On average, it took six working days from the completion of a care plan to the delivery and installation of equipment and aids

### ◁ *What are we going to do in the next three years?*

- ✓ Develop services in the areas of intermediate care and chronic disease management by providing services closer to the patient's own home
- ✓ Implementation of Delivering Emergency Care Services Strategy (DECS)

- ✓ Work towards reducing the time individuals wait for an inpatient or day case hospital admission or for their first new outpatient hospital appointment
- ✓ Work to secure improvement in health and social care services to individuals who have suffered a stroke
- ✓ Support measures to prevent homelessness and support homeless persons including the expansion of the Dewi Sant Centre and extended provision for the NACRO Night Shelter
- ✓ Improving services for disabled children and young people by supporting the development of the Children with Disabilities Services Improvement Plan
- ✓ Improving services for looked after children
- ✓ Develop range of preventative services which reduce risk of dependency and promote independence
- ✓ Develop care pathways for people diagnosed with dementia
- ✓ Development of Crisis Prevention & Management (Challenging Behaviour Services) for children and young people
- ✓ Provide a wide range of housing based support and maximize services for vulnerable people through Supporting People
- ✓ Development and implementation of Carers Commissioning Strategy

### ◁ *What might this mean for you?*

**More choice and availability of short breaks for disabled children**

**No outpatient to wait longer than 10 weeks and no inpatient or day case to wait longer than 14 weeks (by March 09)**

**Providing more care to you in your own home and community to avoid unnecessary hospital/care home admissions**

**A crisis resolution support has been set up to help support people with acute mental health needs in their own homes and communities and so reduce the need for hospital admission**

## 5.CHANGING NEEDS – RESPONSIVE SERVICES

### ◇ *What does this mean?*

By *Changing Needs – Responsive Services* we are acknowledging that there is an abundance of possibilities and life choices for each of us and that to live is to change in understandable ways. Life is characterised by continuity as well as change - with past behaviour and temperaments as fairly reliable guides to the future. Critical times are early childhood; moving from primary to secondary education; moving from Children's Services to Adult Services, starting work; leaving home; starting a family; changing jobs or facing possible redundancy and retirement,

It matters that in Denbighshire we seek to build on people's own resources and complement their own supports as they negotiate their ways through unsought events and changes by: offering skilled help in alleviating problems; counteracting harmful circumstances; assisting people to make sense of their changed circumstances; and seeking to promote valued outcomes. Such interventions may be focused on individuals, couples, families, groups and communities.

### □ *How does this fit with what we know?*

- Some events involve changes that are surprising and welcome, as well as unexpected and challenging changes, such as the diagnosis of an illness, being made redundant or being a victim of violence. All such events tend to trigger stock taking, decision making and change
- We differ in how we cope with challenging events depending on the nature of the change and its expected duration, our history of weathering such change, whether there are other stresses in our lives, our resilience, our networks and our material resources
- Transition processes can be problematic and need further development to ensure that vulnerable people are not disadvantaged when they move from one service to another

### ☆ *What have we done so far?*

#### **We have:**

- Appointed a Disabilities Project Worker funded through the Joint Working Grant who works across Children's and Adult Services, focusing on eligibility, transition, joint planning, training and commissioning
- Developed a plan for intermediate care to support people to live in their own homes rather than remain in hospitals for long periods. The plan envisages creating new services and redesigning existing services so that they provide effective intermediate care

- A newly formed multi-agency team, with a shared working base, whose role is to ensure much closer working with housing colleagues
- Contributed to a regional study of technology with a view to improving the care people are offered in their homes
- Secured £344,000 Capital Grant funding and £40,000 Revenue Grant funding for local Tele-Care and Tele-Health developments targeting: the carers of older people with mental health problems; people with mental health problems; people with learning disabilities; and more broadly, home safety

## ◁ *What are we going to do in the next three years?*

- ✓ Improve the attendance and educational attainment of all Denbighshire's children and young people, including improvements at key transition stages
- ✓ Promote equality of access to services for all individuals and communities with particular emphasis on rural areas
- ✓ Further develop and maintain good working relationships and communication with voluntary and community bodies working alongside statutory organisations to deliver high quality and cost effective services
- ✓ Increase supply of affordable accommodation throughout County in accordance with housing needs
- ✓ Enhancement of Community Learning Disability (Health) Teams
- ✓ Develop and implement Tele-Care Strategy for Denbighshire
- ✓ Review of housing support services for Older People
- ✓ Further support the development of the Community Equipment Services Integration
- ✓ Ensure services are accessible and responsive to patient need by achieving and wherever possible exceeding the targets & standards set by WAG
- ✓ Further develop ways of involving the public in the planning and improvement of services
- ✓ Continue to work towards the implementation of national standards locally, as contained in a range of National Service Frameworks, including those for Children, Young People and Maternity Services; Older People; Adult Mental Health; Coronary Heart Disease; Diabetes; and Renal services
- ✓ Ensure the ongoing delivery of the Multi-Agency Risk Assessment Conference (MARAC) for high risk cases of domestic abuse

◁ *What might this mean for you?*

**Improved transitions for young adults with a learning disability as a result of joint working processes within Conwy & Denbighshire Lifelong Learning, Health & Social Care services**

**Develop an extended enhanced jointly commissioned community equipment store in Rhyl and Ruthin (2008-09)**

**200 vulnerable people will be supported through Tele-Care in 2008-09**

**Pilot housing support project to identify unmet needs of minority groups accessing domestic abuse services**

## 6. LONGER TERM NEEDS

### ◇ *What does this mean?*

By *Longer Term Needs* we refer to the changing requirements for assistance throughout life. It includes children and adults with chronic illnesses (e.g. babies whose survival is due to developments in medical technology as well as people with rheumatoid arthritis, diabetes or HIV), people with learning disabilities, people with physical impairments, people with mental health problems (including those experiencing recurrent episodes), people who experience violence in their homes, people who abuse substances, carers and older people. As we make progress in improving the blend of clinical, rehabilitative and supportive services available in Denbighshire we demonstrate that the longer term needs of our citizens matter.

### □ *How does this fit with what we know?*

- The changing demographic profile of Denbighshire shows that along with a steadily decreasing birth rate people are living longer and there are a growing number of older people including an increase in the number of frail older people
- In Denbighshire a higher percentage of babies have a low birth weight than across Wales as a whole. These babies have a greater risk of developing problems during and after birth as well as having a greater risk of chronic disease when they become adults
- A rise in the proportion of older people will have a significant impact on the health of our population with increasing levels of long term and chronic illness. Over half of people aged over 60 report having a limiting long term illness compared to less than 20% in all other age categories
- People who experience similar conditions (such as people with coronary heart disease) and people who experience similar circumstances (such as those fleeing domestic violence) require individual solutions
- Numerous conditions might be disguised by a single label e.g. someone with mental health problems may also have substance and alcohol abuse problems
- There is a growing number of aging carers of learning disabled adults

### ☆ *What have we done so far?*

#### **We have:**

- Enabled improved access to speech and language therapy for school children - initially funded by the Joint Working Grant
- Promoted an on-line self referral scheme for adults and caregivers requiring assistance which is overseen by the First Contact Team

- Appointed a Joint Commissioning Manager for Mental Health Services
- Facilitated a research study on the health and social care needs of Care Home residents in Denbighshire
- Provided Direct Payments to 32 recipients
- Provided funding of £700,000 to 33 voluntary sector organisations via the Social Services Voluntary Sector Grants Scheme
- Created *Telecare/ Telehealth* pilot projects, including one targeting homes offering 24 hour care to people with mental health problems, and a *Step Down House* equipped with assistive technology which will assist people in returning to their own homes
- Further developed the Keyring project providing low level but sustained support to vulnerable adults
- Secured Welsh Assembly Government funding of £250,000 for the *Doorstop Project* which seeks to give a new start in life to people who have experienced problems arising from substance misuse
- Secured Social Housing Grant funding of £4 million for an Extra Care Housing Scheme in Rhyl (of 30 two bedroom and 29 one bedroom apartments) due to be completed by September 2008 in addition we have secured Secured Extra Care Funding to develop schemes in Ruthin & Prestatyn

### ◀ *What are we going to do in the next three years?*

- ✓ Implement the Chronic Conditions Management and Intermediate Care Strategies and provide care closer to patients homes
- ✓ Redesign and realign services across the health and social care economy that promote independence and reablement, support timely discharge from hospital and provide alternatives to hospital or care home admission
- ✓ Increase capacity of services for people with dementia
- ✓ Implement the 'Local Implementation Plan' for continuing NHS health care
- ✓ Development and implementation of Physical Sensory Impairment (PSI) Commissioning Strategy (currently out for public consultation)
- ✓ Implementation of Learning Disability Commissioning Strategy including the 'Learning Tool' and the development of an Access to Work Strategy
- ✓ Revise and refine our approach to Reablement Services to ensure that vulnerable people are empowered to live independently
- ✓ Increase, year on year, the take up of direct payments and develop a pilot to offer individual budgets (self directed support)

- ✓ Work towards the implementation of the National Strategy for Musculoskeletal conditions which includes rheumatoid arthritis and other similar conditions
- ✓ Ensure that older people and carers have significantly increased choice and control over the way they have their health and social care support needs met and are able to make informed choices relating to their independence and wellbeing (Joint Commissioning Strategy for Older People out for public consultation)
- ✓ Implement the Older People's Strategy

◁ *What might this mean for you?*

**Increase year on year the number of vulnerable adults and older people supported to be as independent as possible within their own home**

**Establish a further Key ring project for vulnerable adults in Prestatyn and an enhanced project in Denbigh to include learning disabled people with more complex needs**

**A person dedicated to working with GP surgeries and other health professionals to identify and support carers**

## 7. PROTECTING AND SAFEGUARDING

### ◇ *What does this mean?*

By *Protecting and Safeguarding* we mean enlisting the help of relatives, friends, neighbours, communities and professionals, including the police and the fire and rescue service, to look out for vulnerable people by alerting others to evidence of: injuries, neglect, restraint, theft, ridicule, bullying and threats of punishment; substantial weight loss/ gain, under/over medication, rape, molestation, abandonment; the undue influence of others in their homes, and general inattention to health and safety hazards. It also means protecting people's health by immunising them, and helping them to avoid other hazards e.g. road traffic accidents through wearing seat belts and food poisoning by promoting good food hygiene. It matters that we help to protect each other from harm and danger and that we take thoughtful and committed action to safeguard individuals and communities.

### □ *How does this fit with what we know?*

- Injuries and their consequences produce heavy burdens in terms of deaths, pain, disability, economic loss and health care costs
- How safe or unsafe we feel in our neighbourhoods is not always related to the incidence of crime
- Individuals who have been the victims of violence and other forms of crime often suffer damage to their health beyond immediate injuries. Fear of crime is associated with increased anxiety and higher blood pressure, and is significantly associated with poor self-rated health
- Domestic violence exacts a tremendous impact on victims and survivors
- Assaults in the home are characterised by the use of power, unchallenged access to victims and profound betrayal
- It is devastating to be abused and the scale of abuse is unknown
- The consequences of abuse go beyond individual suffering and places severe demands on social services, health services, the police and the Criminal Justice System

### ☆ *What have we done so far?*

#### **We have:**

- Appointed a full time Protection of Vulnerable Adults (POVA) Co-ordinator supported by a dedicated part time administrative officer
- All POVA cases managed by POVA Co-ordinator ensuring consistent and effective response to allegations of abuse across client groups

- Further investment has been made in the Receivership function allowing good joint working with Receivership Officer and POVA ensuing financial protection to those who have been financially abused
- Information regarding Whistle Blowing and Finances of Vulnerable People has been integrated in the updated A-Z for Care Workers that has been reissued to all in house provider staff. This information is also provided to all new staff on appointment.
- Denbighshire County Council has implemented a comprehensive training strategy around Protection of Vulnerable Adults and the Mental Capacity Act with a combined total of 400 people in receipt of training
- Fire Safety referral systems have been developed for service users and increased visibility of other enforcement activities e.g. housing enforcement, licensing, community safety work
- Establishment of a dedicated Safeguarding and Reviewing Unit
- introduced the Community Safeguarding toolkit to voluntary organisations and groups working with children and young people in Denbighshire
- The Health Protection Team of the NPHS dealt with a number of health protection issues affecting Denbighshire e.g, the avian flu outbreak

### ◁ *What are we going to do in the next three years?*

- ✓ Develop a joint local Safeguarding Children's Board with Conwy
- ✓ Improve family support, prevention and inclusion services for vulnerable children
- ✓ Work with residential homes to improve reporting alleged abuse & whistle blowing to be undertaken during 2007/08
- ✓ Work on cross agency procedures with Care Standards Inspectorate for Wales (CSIW), NHS Trust and the Police to be undertaken during 2007/08
- ✓ Audit will be undertaken of advocacy services for older people and this will particularly address the needs of people who are most vulnerable
- ✓ Development of POVA specific audits to ensure quality of service
- ✓ Establish a framework to enable looked after children to be able to voice their experiences as customers
- ✓ Implement the Common Assessment Framework pilot to facilitate early intervention opportunities and minimise escalation to a Social Services referral
- ✓ Deliver a corporate programme of child and adult protection training to increase the awareness of staff (and elected members) across the authority and development of community awareness raising of adult protection support available

- ✓ Ensure that pandemic flu arrangements are updated including business continuity plans
- ✓ Implement and monitor Safer Homes Initiative which is provided to victims of domestic abuse
- ✓ Reduce alcohol related crime, criminal damage and fear of crime
- ✓ Maintain an appropriate response on emergency preparedness in relation to infections and environmental issues e.g. outbreaks and contaminated land
- ✓ Maintain and further develop effective systems for supporting hospital, community and primary care services in preventing and managing infections

### ◁ *What might this mean for you?*

**There will be a fully operational advocacy service for older people**

**There will be fewer incidents of alcohol related crime on streets and in licensed premises**

**Early intervention through the Common Assessment Framework will mean that children and young people will get support earlier**

**Our integrated services to protect vulnerable adults will be fully equipped to respond promptly and effectively**

**Improving hospital cleanliness to be in the top 25% in Wales**

## 8. RIGHT SERVICES IN THE RIGHT PLACE

### ◇ *What does this mean?*

By *the Right Services in the Right Place* we mean providing as close as possible to their homes the kind of help people need to be healthy and independent. We see ourselves as enhancing people's abilities, resilience and control over their lives and complementing their own resources with access to services. It matters that in Denbighshire we adopt an approach that builds on the strengths of individuals, families, neighbourhoods and communities by having a workforce that is competent, proactive and makes the best use of all resources.

### □ *How does this fit with what we know?*

- Workforce planning involves making sense of the numbers, skills and competencies of all health and social care employees. Also, it involves identifying the skills and competencies Denbighshire *will* need so that we can deliver new and improved services. By comparing the workforce now, with the workforce we want, we can see the shortages, surpluses and the skills gaps
- By looking closely at our services and gathering views about our priorities, we can link service and financial planning. Also, we can support multi-disciplinary learning, development and working by offering joint training. By using management information systems that are shared across health and social care we can pool information about the labour market in Denbighshire, explore ways of retaining employees and decide how many employees are and will be needed for example

### ☆ *What have we done so far?*

#### **We have:**

- Ensured that all staff working with older and disabled people have achieved their BTEC Award in the provision of community equipment
- Signed up to a Mental Health Partnership with Conwy to create an integrated service
- Ensured the extension of the Heart Failure Team with an additional specialist nurse, funded by the British Heart Foundation
- Enabled the employment of generic support staff who work with the Intermediate Care Critical Response Service to support people who use both health and social care services using Joint Working Grant funds
- Provided inter-agency training regarding the Protection of Vulnerable Adults, Child Protection, Domestic Abuse, Mental Health legislation, Moving and Handling, Continuing Health Care, and Social Work Education and Training

- Made significant progress in enabling 'retirement-age' staff to continue in employment on a full or part-time basis
- Supplemented the workforce capacity in Accident and Emergency and the cancer unit by supporting the recruitment and support of 115 volunteers. The Robins Volunteers won an *Investing in Volunteers* Award in 2006 and now work in all areas of the Trust
- Improving information services for children, young people, families and staff working with children and young people
- Created and re-energised the Health, Social Care and Well-being Workforce Development Partnership
- Developed a Health, Social Care and Well-Being Partnership website to improve access to information
- Established a Needs Assessment Working Group responsible for the development of the Needs Assessment
- Established projects in Rhyl, Corwen & Denbigh which are planning local joint health and social care facilities

### ◀ *What are we going to do in the next three years?*

- ✓ Improve the quality and choice of services for users and carers and implement the Children & Young People's Participation Strategy in full
- ✓ Further develop the role of the Generic Support Worker
- ✓ Development of services through joint and/or regional commissioning
- ✓ Improving the co-ordination of service delivery to children and young people; evaluating and implementing preferred models of multi-agency, integrated and collaborative working
- ✓ Invest in the recruitment and retention and development of staff in the wider health, social care and housing community
- ✓ Ensure access to services can be obtained as close as practicable to communities subject to considerations of safety, quality and resources
- ✓ Support the development of a strong and effective independent and voluntary sector
- ✓ To provide a service that ensures that patients – no matter how or when they contact any of the emergency or unscheduled care services – are assessed and then seen by the most appropriate health care professional at the most appropriate time.
- ✓ To maximise health and well-being by encouraging healthy lifestyles for older people and enhancing the prevention/enabling role of local authority services, health care, independent and voluntary sector provision

- ✓ Ensure services and buildings are configured to take account of future demand and change in health and social care provision
- ✓ Commission appropriate needs assessments to inform future service development

### ◁ *What might this mean for you?*

**Health and social care staff who are better qualified with the skills and knowledge they need for the work they do**

**Bringing GP's, community health and social services together on single sites across Denbighshire**

**Development of specialised teams made up of both health and social care staff**

**Lower level health and social care needs can be met by a single specifically trained worker**



3. Do you agree with “*What we are going to do in the next 3 years?*”

THEME	YES	NO	COMMENT
1. REDUCING POVERTY/ IMPROVING SOCIAL INCLUSION			
2. ENVIRONMENT			
3. POSITIVE LIFESTYLES			
4. EARLY INTERVENTION & CRISIS SUPPORT			
5. CHANGING NEEDS/RESPONSIVE SERVICES			
6. LONGER TERM NEEDS			
7. PROTECTING & SAFEGUARDING			
8. RIGHT SERVICES IN THE RIGHT PLACE			

**4. Have we missed anything – are there any major gaps? Y N**

**4a. If “Yes” please explain:**

**5. How will this strategy affect you or your family’s health and well-being?**

**Positively**

**Negatively**

**Don’t Know**

**No Change**

**5a. Please explain:**

**6. Please feel free to make any further comments:**

If not completing on-line at [www.healthydenbighshire.co.uk](http://www.healthydenbighshire.co.uk) please hand your completed questionnaire to a member of the team or return FREEPOST to:

<b>Denbighshire Health, Social Care &amp; Well-Being Team 64 Brighton Road Rhyl, Denbighshire LL18 3HP 01824-708-363</b>	NAME:
	ADDRESS:
	TELEPHONE

- I wish to be entered into the free prize draw.
- I would like to receive feedback on the draft Denbighshire Health, Social Care & Well-Being Strategy
- I would like to be involved in future Health, Social Care & Well-Being events (consultations, workshops, focus groups, questionnaires etc).

In completing this form, you are agreeing for this information to be held by Denbighshire Health, Social Care & Well-Being Partnership **and used solely for the purposes of monitoring the department's public involvement activity** to ensure that all stakeholders, regardless of their circumstances or status, receive equal access and fair treatment.