PLEASE NOTE VENUE

ADULT AND PUBLIC HEALTH PORTFOLIO DECISION SCHEDULE



Monday 15th January 2007

at 9.00 am

in Training Room 4, Municipal Building Church Square, Hartlepool

Councillor R Waller, Cabinet Member responsible for Adult and Public Health will consider the following items.

1. KEY DECISIONS

1.1 Communities for Health Report – Director of Adult and Community Services

2. OTHERITEMS REQUIRING DECISION

No items

3. ITEMS FOR INFORMATION

3.1 Development of Horticultural Project at Waverley Terrace – *Director of Adult and Community Services*

4. REPORTS FROM OVERVIEW OF SCRUTINY FORUMS

No items

ADULT AND PUBLIC HEALTH PORTFOLIO

Report To Portfolio Holder 15 January 2007



Report of: Director of Adult and Community Services

Subject: COMMUNITIES FOR HEALTH REPORT

SUMMARY

1. PURPOSE OF REPORT

The report seeks authority to join the Communities for Health programme, which will result in a grant of £100,000 to support the Council and its partners in meeting the challenges we face in improving health and reducing inequalities.

2. SUMMARY OF CONTENTS

The report provides background to the programme and some of the key issues faced by the town.

3. RELEVANCE TO PORTFOLIO MEMBER

Departmental importance.

4. TYPE OF DECISION

Key test (i).

5. DECISION MAKING ROUTE

Portfolio Holder

6. DECISION REQUIRED

To authorise the department progressing with this grant submission.

HARTLEPOOLBOROUGH COUNCIL

Report of: Director of Adult and Community Services

Subject: COMMUNITIES FOR HEALTH

1. PURPOSE OF REPORT

1.1 The report seeks authority to join the Communities for Health programme, which will result in a grant of £100,000 to support the Council and its partners in meeting the challenges we face in improving health and reducing inequalities.

2. BACKGROUND

- 2.1 The Council have been invited to join the Department of Health Communities for Health programme, which brings with it the offer of £100,000 grant aid to support the Council and Partners. The strategic aims are:
 - engage communities in their own health and develop their capacity to support individual behavioural change for healthier lifestyles;
 - build partners hips between organisations and communities; and
 - Develop innovative practices for community based health improvement.
- 2.2 The Department of Health anticipates that Communities for Health will focus local activity on the key health priorities of tackling health inequalities, reducing smoking, tackling obesity, improving sexual health and mental health, and encouraging sensible drinking.
- 2.3. The programme was initially launched as a pilot in spring of 2005, after the publication of the Choosing Health White Paper. The programme is now being rolled out to all health inequalities spearhead authorities. By providing this additional grant to local authorities, the Department of Health recognises the crucial role local authorities are playing in co-delivering the shares priorities on health improvement and health inequalities, and the work local authorities are undertaking on health through the Local Area Agreement.
- 2.4. Communities for Health is to develop in light of the experience gained during the first 18 months of its operation, and to reflect recent developments within public sector policy and practice.
- 2.5. These developments include: the growing importance of Local Area Agreements; the publication of the Our Health, Our Care, Our Say, White Paper; the implementation of the latest round of NHS reforms; the publications by the Local Government Association of "The Future of Health and Social Care" and more recently "Better Governance for Better Well-being" and the Strong and Prosperous Communities Local Government White paper.

- 2.6. Communities for Health is a key vehicle for delivering the Small Change Big Difference concept launched by the Prime Minister and the recent Health Challenge England. It provides a real opportunity for a social marketing approach to community health improvement.
- 2.7. Communities for Health is non-recurrent funding and aims to deliver creative thinking and good practice in health improvement work, and capacity building. The grant also aims to develop community groups and voluntary sector, and recognises the key role they have in impacting on health and changing behaviour.
- 2.8. The Local Authority do not have to bid for the grant, but need to confirm our willingness to participate, and use the grant in accordance with the agreed criteria (Appendix A11). The Department of Health will require notification later in 2007 of how we have used these resources, and the outcomes we have achieved.

3. LOCAL ISSUES

- 3.1 Within Hartlepool there are a number of significant health issues which require addressing. Hartlepool is one of the districts with the 5th worst areas for the expectancy in the country and as such is of particular importance that Neighbourhood Renewal Fund and other local partners work together to improve public health. The Public Health Strategy and associated action plan, together with the floor target action plan detail the approach and action taken locally. The Local Area Agreement outlines the key targets.
- 3.2 It is envisaged that the Communities for Health funding of £100,000 would be used to complement these initiatives. Proposals for its use would be agreed by the Health and Care Strategy Group (based on recommendations of the Public Health Strategy Group).

4. RECOMMENDATIONS

4.1 Portfolio is requested approval to agree Hartlepool Borough Council's participation in the Community for Health programme. A further report will be brought to Portfolio outlining the outcomes and proposed use of resources.

Appendix A

Programm e Criteria

From the beginning, a number of criteria were set for funding schemes. They should be able to show that they are: sustainable, through in part the building of community capacity and alignment to the LAA; well-evaluated; based on evidence of need; and use interventions that are evidence based where possible.

These criteria remain unchanged, but there are adjustments in emphasis that we would wish to make. We would like participating areas to consider these in developing their work over the next year.

- Health inequalities has been a priority from the start, but in selecting the second round of council areas from the Spearhead Group we are sending a strong signal that this would be even more strongly represented in the programme as it moves forward.
- We wish to strengthen the opportunity for sharing good practice by creating additional reward for those pilot areas that reach an agreement to support new entrants to the programme with some aspect of their work.
- Choosing Health introduced the language of co-delivery: a shared leadership responsibility between local authorities and PCT's for the delivery of health improvement. Recent publications by central government and the LGA have developed the language of integration of commissioning and provider functions. Local Area Agreements are accepted as a framework for agreeing joint performance plans, and there is a strong drive for more effective community engagement by the public sector. In many areas partnerships are exploring how this might work, and how wider engagement of the third sector might be enabled by such developments. We welcome the use of Community for Health funding to support this direction of travel by showing how we can "commission for health improvement" or develop integrated delivery models that can respond to commissioning plans.
- Allied to this is the continued move away from one-off projects to strategic programmes of change. Communities for Health should contribute to a locally defined cohesive strategy for health improvement. This may draw on other nationally sponsored initiatives such as Health Trainers and Small Change, Big Difference. DH is also keen to seek ways of linking new initiatives for examples Health Direct and the IDeA Healthy Communities programme with your strategic plans through relevant Communities for Health initiatives.
- From the start, we tried to keep the bidding process as simple as possible in line with the move to greater devolution of decision making to the front line. This commitment has been taken a step further in this round: the only requirement that needs to be satisfied before funding is granted is an agreement to provide a report to show how resources have been used to deliver the objectives of this programme.

ADULT AND PUBLIC HEALTHPORTFOLIO

Report To Portfolio Holder 15th January 2007



Report of: Director of Adult and Community Services

Subject: DEVELOPMENT OF HORTICULTURAL PROJECT

AT WAVERLEY TERRACE

SUMMARY

1. PURP OS E OF REPORT

To inform the Portfolio Holder regarding a proposal to allocate allotment land at the Waverley Terrace site to Hartlepool Integrated Mental Health Services in order to develop a horticultural project involving service user volunteers.

2. SUMMARY OF CONTENTS

The Allotment Site at Waverley has recently been refurbished to create a new 13 plot site with a metal 2.4m vertical bar railing perimeter fence in order to address site security and improve the visual impact of the allotments in regards to the adjacent properties.

Hartlepool Integrated Mental Health Services have identified a group of Service User Volunteers who would like to develop an area of allotment land to grow fruit, vegetables and flowers. This produce would be used by their friends and families as well as being outlet to the local food co-operatives in the more disadvantaged areas of Hartlepool. This would have beneficial outcomes for the service users in terms of increased confidence, self esteem and skills development, as well as benefiting the wider community and supporting the healthy eating agenda.

Details of the proposal are provided together with a proposed site plan showing plots currently occupied (**Appendix 1**).

3. RELEVANCE TO PORTFOLIO M EMBER

This report is for information only. Approved by Culture, Leisure and Transportation Portfolio Holder, 12th December 2006.

Allotments are within the remit of the Culture, Leisure and Transportation Portfolio Holder.

4. TYPE OF DECISION

Non-key decision.

5. DECISION MAKING ROUTE

This report is for information only. Approved by Culture, Leisure and Transportation Portfolio Holder, 12th December 2006.

6. DECISION(S) REQUIRED

This report is for information only. Approved by Culture, Leisure and Transportation Portfolio Holder, 12th December 2006.

Report of: Director of Adult and Community Services

Subject: DE VELOPMENT OF HORTICULTURAL PROJECT

AT WAVERLEY TERRACE

1. PURP OS E OF REPORT

1.1 To inform the Portfolio Holder regarding a proposal to allocate an area of allotment land at the Waverley Terrace site to Hartlepool Integrated Mental Health Services in order to develop a horticultural project involving service user volunteers.

1.2 The report gives an indication of the intended use of plot and an outline of the future plans identified by the Hartlepool Integrated Mental Health Services, should the application be successful.

2. BACKGROUND

- 2.1 The Allotment Site at Waverley has recently been refurbished to create a new 13 plot site with a metal 2.4m vertical bar railing perimeter fence in order to address site security and improve the visual impact of the allotments in regards to the adjacent properties. This was in response to a decline over a number of years where the site popularity and occupancy deteriorated, due to high levels of anti-social behaviour and limited investment in the site.
- 2.2 Hartlepool Integrated Mental Health Services have identified a group of Service User Volunteers who would like to develop an allotment area to grow fruit, vegetables and flowers. This produce would be used by their friends and families as well as being outlet to the local food co-operatives in the more disadvantaged areas of Hartlepool. This would have beneficial outcomes for the service users in terms of increased confidence, self esteem and skills development, as well as benefiting the wider community and supporting the healthy eating agenda.
- 2.3 Evidence from other projects such as that run through Loughborough University in 2005 suggests that such projects can promote social inclusion in an individual classed as "Vulnerable" by increasing opportunities for social interaction, overcoming prejudice and stereotyping and allow "vulnerable" adults to make a valuable contribution to their community. In addition, the management of the allotment itself offers an opportunity for the service users to have some control over the running of the project.

3. DETAILS OF THE PROPOSAL

- 3.1 The project would involve the allocation of land at Waverley Terrace to be used by the Service Users and Volunteers. This area is identified on the Map as Area B and Area C. Area D would be retained as a shared area for vehicles for use by all of the site users. In the longer term it is hoped that Area E would be further used as allotment land.
- 3.2 The project would be supported by Tees Valley Wildlife Trust and Mental Health Matters. Diane Whitehead, Planning and Implementation Officer for Mental Health (Hartlepool Borough Council) would take on the role of Project Manager for this initiative.
- 3.3 The project directly contributes to a number of key actions within the Local Area Agreement for Hartlepool namely:-
 - LAA9 Improved Health (Independence, well-being and choice)
 - LAA11 -To support vulnerable adults to exercise choice and control and retain dignity in all aspects of life
 - LAA12 Mental well-being (promoting a positive approach to mental well-being)
 - LAA13 Access to Services
 - LAA29 Enrich individual lives, strengthen communities and improve where people live
 - LAA30 Cultural and Leisure Services better meet the needs of the community, especially disadvantaged areas.
- The site at Waverley offers an ideal central location for the allotment project. It will be situated adjacent to the new ly refurbished allotments (Area A) which will be worked by experienced plot holders. The proposed allocated areas (B and C) offer opportunities for service users and volunteers to further develop the project and achieve positive outcomes. Area D will be retained as a general hard standing area for vehicles.
- 3.5 It is further hoped that the project will act as a catalyst to further investment in the site to assist in the general rejuvenation of the allotment site.
- This project has the potential to highlight Hartlepool as an area of Best Practice as many such projects are based in the South of England. The development of a website alongside the project will allow interested parties to track development of the project as well as providing opportunities for other vulnerable adults with IT interests and skills to be involved in the project.

4. FINANCIAL IMPLICATIONS

4.1 The Hartlepool Integrated Mental Health Services Teamwould seek funding from a range of sources to secure fencing, a shed, tools, seed produce as well as the development of a website for the project.

5. RECOMM ENDATIONS

This report is for information only. Approved by Culture, Leisure and Transportation Portfolio Holder, 12th December 2006.

CONTACT OFFICER: Andrew Pearson, Parks and Countryside Manager

Background Papers

Report to Culture, Housing and Transportation Portfolio, 7th September, 2005 – Development of Waverley Terrace Allotments.

Plan of the Site at Waverley Terrace showing area of proposed Community Project (Appendix 1).

