

## 9 Related strategies and agreements

There are many strategies that are related to the Joint Strategic Needs Assessment but space precludes detailed descriptions of all of them. Some of the main ones are outlined below. Others to which reference might be made include Financial Strategies and Transport Strategies.

### 9.1 Spatial Planning

Gateshead's [Unitary Development Plan \(UDP\)](#) was adopted by the Council in July 2007. Its policies are in the process of being saved. Key components linking to health – housing development, open space provision, encouraging walking and cycling and ensuring adequate community facilities – are considered on a topic chapter basis within the document. Development locations are identified on the accompanying proposals map.

The UDP saved policies will remain in force until they are replaced by a new kind of development plan – the [Local Development Framework \(LDF\)](#). This will encompass all Council Plans and Strategies with spatial outcomes within a Core Strategy backed up with more detailed local development documents and area action plans.

The first stage of bringing this document together – the issues and options consultation – was undertaken in 2008 and the outcomes of this will be fed into a preferred options document that will be consulted upon towards the end of the year. It is recognized that the spatial development and design of development has a key role to play in improving the health of Gateshead's population by encouraging walking, cycling and outdoor pursuits and ensuring development occurs in sustainable locations. The JSNA will be one of the documents that inform this process.

### 9.2 Vision for Adult Social Care and Strategic Commissioning for Independence and Choice

The Government policy statement on the future of community services *Our Health, Our Care, Our Say* provided an opportunity to establish a vision of social care in Gateshead. An extensive consultation [Your Life, Your Way](#) was carried out on the vision. The action plan to implement the vision and the consultation priorities was developed by Gateshead Health and Social Care Partnership and agreed by the Council Cabinet in March 2008. In brief, aims include:

- Provision of support and opportunities for individuals, groups and communities to have more control and influence over their health and emotional well-being. A focus on prevention will be central.
- Helping more people, including family carers, to participate in their communities, have work and leisure and the opportunity to feel fulfilled and valued.

- Enabling people, including the most vulnerable adults, to contribute to their community, family and friendships.
- Ensuring availability of accessible information and support to help people to make informed decisions about how their care can best be delivered.
- Promoting equality through showing respect for all, providing personalised services and promoting the equalities agenda for everybody.
- Enabling individuals, family carers and communities to experience standards of care that respect them and allow them to make choices and take decisions.
- Increasing opportunities for people to improve their financial circumstances.

The Community-based services document [Strategic Commissioning for independence, well-being and choice](#) is Gateshead's Adult Social Care Commissioning strategy. Its focus is adults, particularly the following service user groups: physical disabilities; sensory impairment; learning disabilities; older people; people with mental health problems; and carers. Of particular relevance to JSNA are two of its commissioning aims : outcome 1 - improved health and well-being; and outcome 6 – economic well-being.

### **9.3 Local Area Agreement and Comprehensive Area Assessment**

The Local Area Agreement Strategic Implementation Group on the 11<sup>th</sup> January 2008 reviewed Gateshead's selection of indicators with the Joint Strategic Needs Assessment in mind. Mental health was added as an indicator partly in response to the JSNA priorities.

The Comprehensive Area Assessment has amongst its top 10 intentions a *'focus on places and people – especially people whose circumstances make them vulnerable'* . Additionally, one of its three key questions is: *'how well do local priorities express community needs and aspirations?'* The focus and questions thus relate very strongly to JSNA commissioning intentions.

### **9.4 PSA targets and national indicators**

There exist many [Relevant Public Service Agreements and National Indicators](#) that can affect the choice of priority areas and actions.

### **9.5 Gateshead Homelessness Strategy**

The Council has consulted on and is preparing homelessness strategy (2008-13). The strategy has an emphasis on prevention and eradication of homelessness, a reduction in the use of temporary accommodation and working in partnership to help vulnerable households by providing tailored support to enable them to sustain accommodation in the longer term.

## **9.6 Gateshead Housing Strategy**

The Council's [Housing Strategy](#) (2007-12) sets out the long term overall vision for housing in the borough. It states that housing has a key role to improve people's health. Objectives include ensuring the type and mix of new housing that provides choice, supports economic growth and meets housing needs and demand. It also aims to address specific community and social needs. Priorities linked to health and social care include:

- Providing more affordable housing (direct link to National Indicator 155 in the Local Area Agreement);
- Enabling people to remain in their own home by arranging appropriate support and care, carrying out adaptations and ensuring access to a wide range of assistive technology;
- Providing more specialised accommodation to meet the needs of an aging population, those with long term illnesses, and those with learning and/or physical disabilities.

There is also a housing and health direct link to the Gateshead's Local Area Agreement in connection with NI 155 net additional homes provided (the overall supply) and tackling fuel poverty (NI 187) which helps to reduce seasonal deaths in older people.

The link between housing and health is well recognized ([Housing and Health](#)). A stable, well maintained home underpins general health and well being. Housing which meets needs and aspirations is more likely to support long sustainable communities.

Housing implications will be considered as a specific aspect of any priority areas as these are taken forward for commissioning. For example, improved dementia care at home is likely to involve assistive technology.

As part of the evidence base to inform Gateshead Council's Local Development Framework, a study of housing needs (The Strategic Housing Market Assessment) will be undertaken this year considering housing requirements for the borough and the Tyne and Wear sub region over the next 20 years.

A review of Council owned sheltered housing schemes is considering the future sustainability of 11 schemes comprising over 300 units of accommodation. The review is taking into account factors which mean the accommodation is not fit for purpose due to size, location, facilities and aspirations. It is likely some schemes will have to be decommissioned. It is also likely there will be a time delay before all of the schemes can be reprovided which will impact upon the ability to meet older persons' housing needs.

The housing strategy is being refreshed, especially around the issue of dementia.

### **9.7 Gateshead Private Sector Housing Renewal Strategy 2009-2012**

This strategy addresses issues raised in the [Gateshead Private Sector Stock Condition Survey 2007](#), including the failure of dwellings to meet general housing standards.

The four objectives of the Strategy are to:

- Promote healthy, safe and decent homes in a revitalised housing market.
- Support a flexible, secure and thriving private rented sector.
- Improve warmth, sustainable energy efficiency and tackle climate change.
- Unlock the potential of empty homes to increase housing supply.

### **9.8 Advance care planning**

This NHS South of Tyne and Wear document deals with patients with life-limiting illnesses and focuses on the need for a patient-led approach. The document is to be used in all care settings across SoTW.

### **9.9 Financial Inclusion strategy**

The Financial Inclusion Strategy has four themes:

#### **Worklessness and skills**

Employment and a regular income are essential ingredients to financial inclusion. This strategy will dovetail with other existing strategies to signpost people to employment and training opportunities that will bring about increased levels of wealth.

#### **Debt and credit**

This strategy will promote the work of the Credit Unions, the Council's Housing Services debt advice team and other advice and guidance organisations providing information on managing money and reducing debt, as well as raising the level of financial literacy across Gateshead.

#### **Benefit advice and financial access**

This strategy will improve access to information to ensure publicity is targeted effectively across Gateshead to enable people to claim the right benefits, pensions and allowances.

#### **Housing**

A sustainable home environment is fundamental to health and wellbeing. This strategy will aim to tackle the underlying reasons for rent arrears, mortgage arrears, address fuel poverty and energy efficiency issues as well as work to prevent homelessness. In order to measure the strategy's success, we have identified four key outcomes:

- Tackle financial and social exclusion by helping disadvantaged individuals move from benefits into sustainable employment
- Develop sustainable solutions to improve the financial capacity of individuals and communities within the borough
- Ensure individuals have greater access to financial services and maximise financial entitlement
- Create housing support packages to enable individuals to access and maintain decent, affordable homes

### **9.10 Gateshead health and social care partnership – 5 year strategic plan**

The Health and Social Care Partnership is a strategic forum for the key agencies with responsibility for improving health, well being and social care in Gateshead. It oversees a range of sub-groups which cover all the principal social care client groups and major health issues. With effect from 2010-2011 the HSCP will monitor the participating agencies' progress against the priorities identified in the JSNA. This will help to embed the response to needs assessments in inter-agency working and focus the partnerships on clear priorities for health and well being gain.

### **9.11 Vision 2030**

As outlined in [section 4.10](#), this vision contains a strand known as 'active and healthy Gateshead'. The actions needed to meet its aims are being agreed by a multi-agency group of people and links are being made to the JSNA's aims.

### **9.12 “Being Healthy in Gateshead”**

This is a locally developed strategy, supported by the “Being Healthy” group, a local group of people with a learning disability. It addresses health issues for people in Gateshead with a learning disability.

### **9.13GP practice commissioning**

GatNet, a Gateshead GP practice commissioning consortium prepares commissioning plans for primary care. Its objectives in 2009/10 included cardiovascular disease, reducing financial pressures, respiratory disease, unscheduled care, musculoskeletal services, diabetes, sexual health, mental health, dermatology and prescribing. Its first priority is to improve patient care and it engages with partners to reform its objectives and ensure alignment of strategic priorities.

### **9.14NHS SoTW strategic plan**

The strategic plan for South of Tyne and Wear is summarised in a 'vision map' (see Appendix), showing context, vision, strategy and objectives, along with outcome aspirations and the initiatives and programmes that will help those outcomes to be reached. Its vision is to make South of Tyne and Wear healthy, with better health, excellent patient experience and wise use of money.

### **9.15 SoTW improving health and tackling inequalities through commissioning**

Priorities for NHS South of Tyne and Wear (Gateshead, South Tyneside and Sunderland) include services relating to: health checks; circulatory disease (heart

disease and stroke/TIA); COPD; diabetes; cancer early awareness and detection. Partners involved in the delivery of improvements include hospitals, community services, GPs, dentists and pharmacists.

### **9.16 National Dementia Strategy: joint commissioning strategies for Sunderland, South Tyneside and Gateshead**

The [commissioning strategies](#) derive from the National Dementia Strategy is a cost benefit analysis of the whole system impact of developing early diagnosis and intervention services across health and social care, which will improve the quality of life for those with dementia and their carers, and ultimately reduce expenditure on health and social care in the context of increasing demand through demographic change.

The strategy sets out 17 objectives for each health and social care community. Its aims are to raise awareness and understanding of dementia, to provide early diagnosis and support and to ensure high quality care throughout the journey. One of the objectives is development of a local joint commissioning strategy, through which all the other objectives would be addressed.

Each locality has developed a multi agency senior officer group for older people's mental health, accountable currently to the Older people's Partnerships or their equivalent. The development and delivery of the dementia strategy is a key workstream for the groups.

### **9.17 Open Spaces Strategy and Green Action Plan**

The Open Spaces Strategy draws in all relevant departments within the Council to manage and improve open space to ensure that it best meets the needs of local people and visitors. ([Annex 2.3.](#))

The Council is currently joining with Newcastle City Council in commissioning a Green Infrastructure Study, Strategy and Action Plan. This will identify the strategic network of green sites and links throughout the area which is needed to maximise the quality of life. ([Annex 2.3.](#))