

## RUTLAND HEALTH AND WELLBEING BOARD

21 March 2023

### JOINT HEALTH AND WELLBEING STRATEGY

#### Report of the Portfolio Holder for Health, Wellbeing and Adult Care

Strategic Aim:	Protecting the vulnerable	
Exempt Information	No	
Cabinet Member(s) Responsible:	Cllr S Harvey, Portfolio Holder for Health, Wellbeing and Adult Care	
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Ward Councillors	n/a	

#### DECISION RECOMMENDATIONS

That the Board:

1. Notes the further development of the JHWS Delivery Plan.
2. Notes the latest Rutland Outcomes Report.

## 1 PURPOSE OF THE REPORT

- 1.1 The Joint Health and Wellbeing Strategy (JHWS) is a statutory responsibility of the Health and Wellbeing Board (HWB) and falls under its governance.
- 1.2 The purpose of this report is to update the board on progress of the JHWS Delivery Plan.
- 1.3 The report also highlights elements of the Rutland Outcomes Report for consideration.

## 2 BACKGROUND AND MAIN CONSIDERATIONS

- 2.1 The overall aim of the joint strategy is ‘people living well in active communities.’ It aims to ‘nurture safe, healthy and caring communities in which people start well and thrive together throughout their lives’. In order to achieve its objectives, the Strategy is structured into seven priorities following a life course model.
- 2.2 Appendix A provides a **high-level summary of progress across the JHWS’s priorities**. This includes activities to achieve all elements of the strategy, the lead, the timescale, how success will be measured and also importantly also risks, mitigations and issues for escalation and discussion. The leads also use coloured rating to show whether or not progress is on target and where activity is yet to start and where outcomes have been achieved and the action can be closed. Note this is an evolving plan and will be updated and amended as required.
- 2.3 The following are some highlights from the progress reported:
- New mental health pathway in place which directs people to the most relevant service route to deal with their need. This includes use of the Central Access Point for dealing with crises and use of the RISE service for Mental Health Care Management and Social Prescribing. (Priority 7a Mental Health)
  - Armed Forces survey has been commissioned for personnel and families arriving from Cyprus in Summer 23 to understand health and wellbeing needs. (Priority 7b Inequalities)
  - Specialist palliative care virtual ward commenced on 27<sup>th</sup> February. It will provide enhanced medical and nursing monitoring, assessment, and intervention. This includes remote monitoring, holistic support and follow-up for patients admitted to hospital with a clinical specialist palliative diagnosis or exacerbation of their palliative condition, who could be at risk of deterioration after discharge. (Priority 6 Dying Well)
  - All Additional Roles Reimbursement Scheme (ARRS) roles have been recruited to and there is an additional digital transformation lead role which will support local digital developments (Priority 4 Equitable Access)
  - The Hospital Team assisted with 34 discharges from hospital in January. A new measure within the strategy plan to demonstrate prompt and safe hospital discharges has enabled the following data to be highlighted: 25 of the 34 discharges took place within 48 hours of the patient being medically fit while 12 left on the same day as becoming medically fit. The January average delay per person was 2.1 days. (Priority 3 Ageing Well)
- 2.4 **Next steps** include completion of an annual review to identify what has been achieved by end of the first 12 months of the strategy delivery and what progress looks like over the coming 12 months.
- 2.5 Appendix B is an **Outcomes Summary Report** which provides additional context by setting out the most recent Public Health data available for indicators relevant to each of the Strategy’s priorities. It highlights whether Rutland rates are below, similar to or above either national rates or the rates in a group of 16 similar areas of the country, offering greatest detail on indicators of concern. These data are released with a time lag, so the impact of the early work undertaken to deliver the strategy will not initially be reflected here. The reports will be used ongoing by priority teams in their targeting and prioritisation.
- 2.6 The report highlights many areas where Rutland performs well in comparison to

other similar areas:

- Highest ranked areas within Priority 1 include A&E attendances for 0 to 4 years, Year 6 prevalence of overweight, hospital injuries caused by unintentional and deliberate injuries in both age categories of 0 to 4 years and 0 to 14 years. Within Priorities 2 and 3 respectively, Rutland performs well in Cancer screening for bowel cancer and for Emergency hospital admissions due to falls in people over 65 years. Within Cross Cutting Themes, Mental Health, Rutland Performs well for Admissions for alcohol related harm and Emergency admissions for intentional self-harm. (No change from previous HWB report)
- There are also areas where Rutland is performing comparatively poorly. The following are areas where there are worsening indicators:
  - i. Proportion of children receiving a 12-month review - Rutland is ranked 16th out of 16 in 2021/22. The proportion of children receiving a 12-month review has decreased from 37.0% in 2020/21 to 29.7% in 2021/22 (Priority 1).
  - ii. Population vaccination coverage for HPV (one dose) for 12-13 years old (Females) - Rutland is ranked 16th out of 16 in 2020/21. The latest value for Rutland is 61.2%, which is below the benchmarking goal of 80% (Priority 1)
  - iii. Percentage of school pupils with social, emotional or mental health needs (Priority 1) and cancer screening coverage for breast cancer (Priority 2).

2.7 **Next steps:** commence work with priority leads to devise strategies to make improvements to these areas demonstrating worsening indicators.

### **3 ALTERNATIVE OPTIONS**

3.1 The JHWS is a statutory responsibility and has been consulted on publicly.

### **4 FINANCIAL IMPLICATIONS**

4.1 In common with previous JHWS, the strategy brings together and influences the spending plans of its constituent partners or programmes (including the Better Care Fund), and will enhance the ability to bid for national, regional or ICS funding to drive forward change.

### **5 LEGAL AND GOVERNANCE CONSIDERATIONS**

5.1 The JHWS meets the HWB's statutory duty to produce a JHWS, and the ICS duty for there to be a Place Led Plan for the local population.

5.2 JHWS actions will be delivered on behalf of the HWB via the CYPP and IDG.

### **6 DATA PROTECTION IMPLICATIONS**

6.1 Data Protection Impact Assessments (DPIA) will be undertaken for individual projects as and when required to ensure that any risks to the rights and freedoms of natural persons through proposed changes to the processing of personal data are appropriately managed and mitigated.

## **7 EQUALITY IMPACT ASSESSMENT**

- 7.1 Equality and human rights are key themes in embedding an equitable approach to the development and implementation of the Plan. An RCC high level Equality Impact Assessment (EqIA) has been completed and approved.
- 7.2 The initial Equality Impact Assessment sets out how the Strategy, successfully implemented, could help to reduce a wide range of inequalities. It is acknowledged that the strategy and delivery plan are high level and therefore additional equality impact assessments will be completed as appropriate as services are redesigned or recommissioned within the life of the strategy.

## **8 COMMUNITY SAFETY IMPLICATIONS**

- 8.1 Having a safe and resilient environment has a positive impact on health and wellbeing. National evidence has also shown that more equal societies experience less crime and higher levels of feeling safe than unequal communities. The JHWS has no specific community safety implications but will work to build relationships across the Community Safety Partnership and to build strong resilient communities across Rutland.

## **9 HEALTH AND WELLBEING IMPLICATIONS**

- 9.1 The JHWS is a central tool in supporting local partners to work together effectively with the Rutland population to enhance and maintain health and wellbeing.

## **10 CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS**

- 10.1 The JHWS provides a clear, single vision for health and care with purpose of driving change and improving health and wellbeing outcomes for Rutland residents and patients. The progress against the plan set out in this paper supports the HWB in tracking and steering delivery.

## **11 BACKGROUND PAPERS**

- 11.1 There are no additional background papers.

## **12 APPENDICES**

- 12.1 Appendices are as follows:
- A. JHWS Delivery Plan February 2023
  - B. JHWS Outcomes Summary Report March 2023

**A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.**