**REPORT NO: 213/2013** 

# PEOPLE (ADULT & HEALTH) SCRUTINY PANEL

Date 26th September 2013

# **JOINT HEALTH AND WELLBEING STRATEGY (FINAL)**

## Report of the Director of People

STRATEGIC AIM:	Meeting the Health and Wellbeing Needs of the Community
	Creating an Active and Enriched Community
	Creating a Brighter Future for All
	Creating a Safer Community

### 1. PURPOSE OF THE REPORT

**1.1** This report will update the Scrutiny Panel on the Rutland Health and Wellbeing Board's (HWB) Joint Health and Wellbeing Strategy (JHWS).

### 2. RECOMMENDATIONS

2.1 That members make note of the Joint Health and Wellbeing Strategy which has now been adopted.

### 3 BACKGROUND

- 3.1 The Health and Social Care Act 2012 section 193 places the duty on Rutland County Council and East Leicestershire and Rutland Clinical Commissioning Group to produce a Joint Health and Wellbeing Strategy; this is to ensure that the health and wellbeing needs of the community are met. This responsibility has been developed through the Rutland Health and Wellbeing Board (HWB).
- 3.2 The HWB has held a number of informal development sessions to progress a JHWS, a draft version was publicly consulted on for 6 weeks, the consultation period ended on 2<sup>nd</sup> August 2013. All feedback from consultation has been considered and an amended version of the document was presented to the HWB on 27<sup>th</sup> August for approval. The final version of the strategy is attached at Appendix 1 (this is also available at www.rutland.gov.uk/healthandwellbeing); members of this scrutiny panel are asked to note the revised strategy.
- **3.3** There are 3 subgroups of the HWB which will lead on delivering the strategy:
  - Complex Needs (Jointly chaired by Mandy Stott and Vicky Todd)
  - Staying Healthy (Chaired by Julian Mallinson)
  - Children's Trust (Chaired by Cllr Ken Bool, lead officer Mark Naylor)

- 3.4 Each subgroup has started to develop action plans to deliver the JHWS, these are attached at Appendix 2-4. Members of DMT are asked to note the draft action plans and identify where their teams will link in to delivering the action plan(s).
- 3.5 The HWB has agreed that quarterly progress reports will be presented to the Executive and Integrated Commissioning Group (EICG), this group is chaired by Jill Haigh, Senior Manager for Health, Wellbeing and Commissioning. The EICG will then report up to the HWB regarding progress against the action plans by exception. The subgroups will be able to discuss and investigate new commissioning opportunities with the EICG; proposals supported by the EICG will go to the HWB for a decision.

## 4 RISK MANAGEMENT (see separate guidance on how to complete)

		COMMENTS
RISK	IMPACT	
Time	Low	Action plans are already being developed to deliver the strategy.
Viability	Low	A comprehensive substructure is in place to deliver the strategy.
Finance	Low	The JHWS is primarily focussed on using existing resources to drive better value for money, particularly through partnership working and by using the flexibilities provided by s75 of the National Health Service Act 2006 (lead commissioner, integrated provision, pooled budgets).
		The JHWS will promote integrated working with other key health organisations which should in turn identify where savings can be achieved. The HWB does have a commissioning budget; spending against this budget will need to demonstrate clear links to the JHWS.
Profile	Medium	The HWB is now a statutory committee of Rutland County Council, it will be important to have the full support of the community; the HWB has listened to consultation and incorporated feedback into the final document. The HWB will now need to demonstrate that it is delivering against the strategy.
Equality and Diversity	Low	An equality analysis (screening) has been undertaken, this concluded that a full EIA was not required as the strategy does not have any adverse impact on any of the nine protected characteristic groups.

**Background Papers** 

Rutland Joint Health and Wellbeing Strategy (JHWS)

**Report Author** 

Jill Haigh, Senior Manager for Health, Wellbeing and Commissioning

(NB If Report contains Exempt Information, no reference should be made to Background Papers)

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