

RUTLAND HEALTH AND WELLBEING BOARD

12 JANUARY 2021

QUESTIONS AND ANSWERS

Questions are answered below following the discussion at the Health and Wellbeing Board. The deputations received will be fed into the stakeholder group which is being formed to progress discussion and then progressed into the Rutland conversation.

1. Question from Mr Sinclair Rogers

“To what extent can NHS planners and clinical commissioning groups take account of patients' desire to use primary health care that is close to their home or can be accessed by a journey that is easy and cheap?”

The CCG is committed to supporting patients closer to home in line with the NHS Long Term Plan. Through the development of our Primary Care Networks we aspire to create high-functioning Integrated Neighbourhood Teams working across health and social care in Rutland.

2. Questions from Jennifer Fenelon on behalf of the Rutland Health and Social Care Policy Consortium

Our questions to the Rutland Health and Wellbeing Board are as follows: -

Q1 How will the 5 year health and wellbeing strategy be integrated with the Rutland Health Plan and with other relevant plans?

Rutland Joint 5 year Health and Wellbeing Strategy: Covid prevented the rewrite of the 5 year plan when it lapsed in 2020. The strategy which should guide the formulation of health policy has not been as prominent with the public or County Council in the past as it could be.

- A Rutland Health Plan. The recent consultation on UHL reconfiguration has highlighted the need to adapt acute and non-acute services to changing demography and technology. The Rutland public welcomed the opportunity for a fresh look at all services being provided for Rutland both from within LLR (including post closure of LGH) and from adjoining providers.

The CCG are excited to be working with colleagues from RCC on developing an overarching Rutland plan. The intention is to create a plan that describes how Rutland, as a place, will meet the health and care outcomes for its population as well as focusing on the wider determinants of health such as education, employment and lifestyle choices.

Q2 What will be the terms of reference for this Rutland Health Plan project? Who will be involved and how? How will its outcomes be linked to both patient input and the 5 year health & wellbeing strategy?

- Integrated health and social care. To confine the plan to health alone would appear to be a missed opportunity

As above.

Q3 Will the Rutland Health Plan be instead of a Health and Social Care Plan?

Answered in Q1

- It provides the opportunity to put Rutland residents at the centre and view in the round all services provided to them in whatever County

Q4 Will the Plan cover all acute and non-acute services wherever provided to Rutland people? Yes

- We note that the CCG has offered the services of the Integrated Delivery Group. This could be extremely helpful for implementation after the future shape of services is agreed in the Health Plan. We have not yet seen details of the proposed Rutland Strategy Group

Answered in Q5 below – the Health and Wellbeing Board

Q5 Could the respective roles and memberships of the Integrated Delivery Group and Rutland Strategy Group be explained?

In summary, we greatly welcome your approach. It offers a very timely opportunity to create a joined-up direction that properly incorporates public views.

Relayed at the recent Health and Wellbeing Board (HWB) meeting – the stratagem group is the HWB.

3. Question from Miles Williamson-Noble

“The current consultation on the reconfiguration of Leicester’s hospitals concentrates on acute and some outpatient services in Leicester and Leicestershire, but pays little regard to services provided in Rutland and ignores those members of Rutland who go outside the LLR footprint for primary and secondary healthcare. The CEO of the LLR Clinical Commissioning Group has stated publicly that healthcare in Rutland is for the Health and Wellbeing Board, the Rutland Delivery Group and the Rutland Strategy Group to decide. What representation will the public have on these groups, and how will the interests of all Rutland residents, including those not directly served by the LLR CCG, be safeguarded?”

Rutland Health and Wellbeing Board is in process of forming a stakeholder group to capture as many voices as possible to feed into the Health and Social care plan. This will inform the recently started “Rutland Conversation” to take the ideas to the population.

4. Questions from Judy Greer

The subject of Health in Rutland is extremely important and should be high on the priority list of the Rutland County Council to ensure that timely and suitable provision is achieved. I would like to say that I feel it is very important that the residents of Rutland are involved in the Rutland Conversation that is being proposed around the Rutland Health Plan. They will be particularly adversely affected by the proposals to move acute care to the LRI in Leicester, especially in terms of accessibility.

Question 1. What is the time frame envisaged for this Conversation to take place and who will be involved?

It is also crucial that the proposals to transfer community care to the local areas, as mentioned in the Rutland Health Plan Conference on 9th December, be openly discussed and provide a suitable range of care through the Rutland Memorial Hospital and other means to the local community in good time to compensate for the centralisation of acute care to the LRI.

Health care will be included in the Rutland Conversation and will be informed by a stakeholder group. It is envisaged the stake holder group will be a collaboration chaired by Healthwatch Rutland.

– the time frame is being developed.

Question 2. Who will be responsible for the operation of a community based healthcare system? There seem to be so many Groups, Boards and Consortia involved at present. A hydra does not produce an efficient operation.

Rutland's Primary Care Network will be at the heart of operationalising Rutland's healthcare system. Comprehensive population health management information exists at PCN level which helps us to determine the effectiveness of health services. This information, combined with local Public Health information, as published in the Joint Strategic Needs Assessment, provides us with rich information about the impact of local health and care services on the population of Rutland. Our responsibility, as a CCG, is to commission services that improve outcomes for local populations. We recognise that improved outcomes can only be achieved when integrated community health and care services are tailored to meet the needs of a local population.

The amalgamation of both health and social care in Rutland under one umbrella would seem to be a sensible and economical result. [This is our aim ultimately.](#)

5. Question from Mr Richard Camp

“In discussing agenda item 6 (Future of Community Healthcare in Rutland), it would be of value for the public (a) to hear details of the public consultation there will be in relation to this, and (b) to hear whether and to what extent this matter will be included in the Future Rutland Conversation project to be discussed by full Council on 11th January”

The Council is currently developing a Stakeholder group to capture as many voices as possible chaired by Health Watch with the CCG and Social Care at the table. The stake holder group will feed into the Health and Wellbeing Board chaired by Cllr Alan Walters.

The Rutland Conversation will be used as a vehicle to take the ideas from the stakeholder group to the people alongside other related considerations to the county.