

HEALTH AND WELLBEING BOARD

5 April 2022

JOINT HEALTH AND WELLBEING STRATEGY AND PLACE LED DELIVERY PLAN

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

Strategic Aim:	Protecting the vulnerable	
Exempt Information	No	
Cabinet Member(s) Responsible:	Councillor S Harvey, Portfolio Holder for Health, Wellbeing and Adult Care	
Contact Officer(s):	John Morley, Strategic Director for Adult Services and Health	01572 758442 jmorley@rutland.gov.uk
	Mike Sandys, Director Public Health RCC	0116 3054259 mike.sandys@leics.gov.uk
	Fay Bayliss, Deputy Director of Integration and Transformation, LLR CCGs	07717 346584 fay.bayliss@nhs.net
Ward Councillors	n/a	

DECISION RECOMMENDATIONS

That the Board:

- Notes the outcomes of the 22 February 2022 special meeting relating to the Joint Health and Wellbeing Strategy, and the legal requirement for formal HWB decisions to be taken at in person meetings.
- Approves the *Rutland Joint Health and Wellbeing Strategy: A Plan for Place 2022-27* and endorses the production of a public-facing strategy document for publication in paper and electronic format.
- Notes the initial Delivery Plan and authorises the Directors for Adult Social Care, Public Health and Children and Families, in consultation with the Cabinet Member with portfolio for Health, Wellbeing and Adult Care to oversee work to further refine the delivery plan leading up to the Strategy launch in July 2022, working with local stakeholders.

4. Notes the revised Health and Wellbeing Board Terms of Reference and the role of this in supporting JHWS delivery.
5. Supports further development of Health and Wellbeing Board subgroup governance (including the Integrated Delivery Group (IDG) and Children and Young People's Partnership (CYPP) to strengthen delivery of the JHWS under the delegated guidance of the Directors for Adult Social Care, Public Health and Children and Families, in consultation with the Cabinet Member with portfolio for Health, Wellbeing and Adult Care.

1 PURPOSE OF THE REPORT

- 1.1 The Joint Health and Wellbeing Strategy 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 seek approval for the Joint Health and Wellbeing Strategy: A Plan for Place 2022-27 (the JHWS), and to endorse a number of actions, as set out above, which will ensure readiness to deliver the strategy from July 2022.

2 ENDORSING THE STRATEGY AND PLAN

- 2.1 At the 22 February online Special HWB meeting, the JHWS and its associated initial delivery plan were reviewed in detail. The strategy and delivery plan were positively received, but it was clarified that the decision to approve the strategy could not be taken on the day as current legislation dictates that formal decisions must be taken in person.
- 2.2 The Board therefore:
 - a) NOTED the context and purpose of the Joint Health and Wellbeing Strategy (JHWS).
 - b) NOTED the report detailing the outcomes of the JHWS consultation exercise.
 - c) AGREED TO DEFER the endorsement of Rutland Joint Health and Wellbeing Strategy and its associated initial Delivery Plan, including: an extension to the life of the strategy from three to five years (2022-27); and adjustments to the structure of the Delivery Plan's priorities.
 - d) AUTHORISED the Directors for Adult Social Care and Public Health, in consultation with the Cabinet Member with portfolio for Health, Wellbeing and Adult Care to oversee work to further refine the delivery plan leading up to the Strategy launch, working with local stakeholders.
 - e) APPROVED the proposed evolution of the Health and Wellbeing Board, including adopting the 'Do, sponsor, watch' approach to prioritising actions, reviewing the terms of reference of the board and subgroups and developing an engagement strategy including a participation group to support development of the board.
- 2.3 **As such, the Board are asked at the in-person HWB meeting on 5 April 2022 formally to approve the JHWS (Appendix A).**

- 2.4 There are several elements of work to ensure readiness to deliver the strategy, set out below.
- 2.5 First, to raise awareness of the strategy, the Board are asked to **endorse the production of a succinct and visual public-facing version of the JHWS**. This will set out: the context for the JHWS the strategy's vision, seven priorities for action, the working principles and enablers which will help it to be delivered successfully.
- 2.6 The public-facing version of the JHWS is an important step in increasing the visibility of the HWB in Rutland and public understanding of the Board's role on behalf of Rutland residents and patients.
- 2.7 Second, complementing this, a **communication and engagement plan is being developed** (proposed to be tabled at the next HWB), supporting the work of the HWB and delivery of the JHWS. This is being designed to dovetail with the Council's corporate Communication Strategy going to Cabinet on 5 April and will also need to align with the Communications Strategies and approaches of other key HWB partners. It will set out a structured plan spanning several types and aims of communication, notably:
- **Informing:** imparting information and promoting awareness.
 - **Engaging:** targeted discussions with relevant stakeholders which are more active and involved, helping to generate increased mutual understanding and new solutions.
 - **Consulting:** where there is a more formal and structured process of gathering views to inform decisions and actions.
- 2.8 Promoting and progressing the work of the HWB and the JHWS through communication and engagement will be enhanced by the HWB developing appropriate communication channels, including a social media presence. It will also be supported by all HWB members being able to take an active part in promoting HWB/JHWS activity in a coordinated way. To support this, a visual brand is being considered with reusable assets and a recognisable style. This would make it easier to build awareness among the public of the HWB, of its health and wellbeing remit and progress, and of the opportunities which will be available for the public to get involved, whether by simply attending the HWB, sharing their views in a consultation or using their lived experience to help to inform the reshaping of services they use.
- 2.9 Third, the Board's **Terms of Reference** (see parallel paper presented to 5 April 2022 HWB meeting) have been updated in the context of the JHWS, also to support successful delivery of the strategy, including by clarifying voting membership of the Board and the role of sub-groups in supporting the core business of JHWS delivery.
- 2.10 Fourth, the Board have adopted a **'Do, Sponsor, Watch' approach** which will help to focus their attention on the actions where they can bring most value, with actions tagged as 'Do' receiving greater oversight and intervention than those in the Sponsor and Watch categories.
- 2.11 Fifth, the Board is reminded that, as discussed in February, the **initial JHWS delivery plan (Appendix B) is being further developed** by HWB sub-groups, and with input from other relevant groups of stakeholders, working together to define and deliver the JHWS priorities. This includes confirming lead roles, timescales and

targets. A particular focus of current work is on the actions committed in the first year of the strategy, to be implemented from July 2022.

- 2.12 Sixth and finally, **further development of governance structures** is planned. Place governance needs to be coordinated with System governance, with the Integrated Care Board and Integrated Care Partnership at the head of these structures. Rutland is represented directly on the Integrated Care Partnership.
- 2.13 In turn, the HWB has two formal sub-groups, each of which will play a role in supporting the delivery of the JHWS. The first is the Children and Young People's Partnership, which may choose to establish its own sub-groups, temporary or ongoing to support the delivery of JHWS Priority 1: Best Start for Life (and actions across the wider strategy also affecting children, young people and families).
- 2.14 The second sub-group is the Integrated Delivery Group, which would have a broader role across the strategy. In the time available to the IDG, it would struggle to develop the level and intensity of partnership working that the strategy requires for successful delivery across its priorities. Therefore, sub-groups are proposed, reporting into the IDG, which would remain responsible for drawing together progress across the strategy as a whole, unblocking where issues and ensuring coordination and consistency across the strategy's workstrands. Sub-group leads would be key members of IDG to support and enable this, with an identified lead for each priority area.
- 2.15 The Rutland Strategic Health Developments Project Board has already been convened to drive forward Priority 4: Equitable access to services and Priority 5: Preparing for population growth and change. A Rutland Mental Health group is also already in place supporting the piloting of new roles and schemes in Rutland as part of system changes in mental health services. Reporting into Integrated Care Board structures, this group would also keep the IDG apprised of its progress against the JHWS.
- 2.16 In turn, two further groups are likely to be beneficial, the first to focus on Priority 2: Staying Health and Independent, and the second to focus on Priority 3: Healthy ageing and Priority 6: Supported end of life, these two areas of work being closely inter-related.
- 2.17 All groups would consider the cross-cutting themes, notably their role in reducing inequalities and giving parity of esteem to mental and physical health. Public Health, in turn, would take a lead role in the third cross-cutting area of Covid readiness.

3 ALTERNATIVE OPTIONS

- 3.1 A consultation was undertaken on the draft strategy, and workshops held to further develop the strategy and plan, both of these exercises helping to inform initial delivery plan at Appendix B.

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.

4.2 The JHWS, in setting out shared priorities across health and care partners, is intended to support and inform the commissioning of local health and care services for Rutland for 2022-27.

4.3 The JHWS is not associated at this stage with new recurrent funding.

5 LEGAL AND GOVERNANCE CONSIDERATIONS

5.1 This plan answers the statutory duty of the HWB to produce a JHWS and the ICS requirement to have a Place Led Plan for the local population.

5.2 The strategy needs to be approved by the HWB. JHWS actions will be delivered on behalf of the HWB via the CYPP and IDG, which will monitor progress using a dashboard and report regularly on progress to the HWB.

6 DATA PROTECTION IMPLICATIONS

6.1 A Data Protection Impact Assessment (DPIA) has not been completed for the strategy as a whole as the strategy does not change how personal data is processed. DPIAs 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. An example is the Shared Care Record project, which is already underway, and where development has been underpinned by a DPIA and appropriate sharing agreements and other protocols.

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. An important pillar of the strategy is to better understand inequities in health and care across Rutland populations, and to reduce this inequity, 'levelling up' outcomes. Targeted populations include:

- those with protected characteristics (e.g. people of all ages living with disabilities, including those with learning disabilities who, nationally, have been found to live shorter lives on average than the wider population; females, whose healthy life expectancy is declining more rapidly in Rutland than the national average, and people of different ages who may be disadvantaged, here, children and young people facing challenges which may impact on their future development, and older people with complex care needs who may struggle to access services),
- those who are protected otherwise by law (e.g. the Armed Forces community under the new provisions of the Armed Forces Covenant), and
- other populations facing disadvantage, including those because of wider determinants of health (e.g. those living on low incomes or in professions which impact on their wellbeing e.g. the farming community).

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 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 your 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 Plan 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 Plan will be a central tool in supporting local partners to work together effectively with the Rutland population to enhance and maintain health and wellbeing.

10 ORGANISATIONAL IMPLICATIONS

- 10.1 **Environmental implications:** Rutland's JHWS strategy uses the Dahlgren and Whitehead (2006) social model of health to recognise the importance of the wider determinants on health on our health and wellbeing. This includes the importance of the impact of the environment in which we are born, live and grow. Links have been made with relevant Council departments to ensure environmental implications are considered both during plan development and in implementation. Among the key priorities identified have been the importance of access to green space and active transport opportunities.
- 10.2 **Human Resource implications:** The JHWS delivery plan includes measures designed to ensure the sufficiency and good fit of the health and care workforce serving Rutland residents into the future, including in number and skills. This is an important enabler for the strategy with implications for all member organisations of the HWB.
- 10.3 **Procurement Implications:** Once approved, the JHWS, alongside the Joint Strategic Needs Assessment, will be a key reference point guiding the (re)commissioning of health and wellbeing services for Rutland residents of all ages. There will be an increased emphasis on integration and joint commissioning across health and care where this has potential to improve service quality, reach and/or value for money for Rutland residents.

11 CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

- 11.1 The JHWS will provide a clear, single vision for health and care that will drive change and improve health and wellbeing outcomes for Rutland residents. This will meet the statutory duty of the HWB and the need to develop a Place Led Plan as part of the emerging Integrated Care System.
- 11.2 The strategy presents seven key priorities with associated actions and principles for implementation from July 2022.
- 11.3 The actions set out in this paper will help to ensure the readiness of partners to deliver to their joint aims and vision as set out in the JHWS.

12 BACKGROUND PAPERS

12.1 There are no additional background papers.

13 APPENDICES

13.1 Appendices are as follows:

A. Health and Wellbeing Strategy 2022-27

B. Place Led Delivery Plan

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