

# Joint Health and Wellbeing Strategy

Performance Report

Apr-Jun 2022

Senior Reporting Officer:

Debra Mitchell and John Morley

The JHWS is the 2022-27 health and wellbeing work programme of the Rutland Health and Wellbeing Board, whose aim is “safe, healthy and caring communities in which people start well and thrive together throughout their lives”.

## Status Summary

RAG

## Key decisions and achievements this period

### Overview of progress

The JHWS was formally approved by the Health and Wellbeing Board in April 2022. Priority level leads have been identified who have been enriching the delivery plan to ensure it is implementation-ready for JHWS launch in July 2022. Many key actions are already underway across the programme. In parallel, a working group has developed a Communications and Engagement Plan to complement and support delivery of the JHWS. This will be considered by the Rutland HWB at the July meeting.

### Decision requests

1. Note progress on the delivery plan to date and endorse JHWS reporting formats.
2. Endorse the direction of and approve the next steps for the Communications and Engagement Plan.
3. Endorse a coordinated approach where possible across the system and three places for JHWS communications and promotion.

### Areas where work is underway and running to plan

1. Finalising the JHWS delivery plan.
2. Reviewing funding available to support balanced progress across the JHWS delivery plan.
3. Aligning the JHWS delivery plan and health investment plans to ensure the JHWS place plan can be used as a single point of reference for place priorities

### Key Achievements

1. HWB approval of the JHWS in April.
2. Identification of priority leads and development of the JHWS delivery plan to implementation readiness.
3. Health investment proposals for Rutland further developed.

### Variations to plan

None currently.

### Focus next period

Jul-Sep – start-up of JHWS implementation.

### Dependencies

Launch of the Integrated Care Board July 2022.  
The state of the pandemic

### Risks and Issues

# JHWS Progress Update: Priority 1 Best start for life

| Priority update            |   | Reporting Period: Apr-Jun 2022 |       |                 |     |
|----------------------------|---|--------------------------------|-------|-----------------|-----|
| <b>Priority Focus Area</b> | 'Socialising' the plan, increasing clarity around implementation priorities for Year 1.                             | <b>Overall Current</b>         | Green | <b>Previous</b> | n/a |
| <b>Lead</b>                | Dawn Godfrey (HWB), Bernadette Caffrey (IDG)  | <b>Decisions</b>               |       |                 |     |
| <b>Objective</b>           | Giving children and young people the best start for life, supporting confident families, access to health services. | <b>Escalation issues</b>       |       |                 |     |
| <b>Strategy Phase</b>      | Preparation   | <b>Other risks and issues</b>  |       |                 |     |

| Achievements this period: Apr-Jun 2022 | Forward Plan for next period: Jul-Sep 2022 |
|--|--|
|--|--|

**Do**  
**Health equity across the LLR system** - To achieve the vision for Maternity and Neonatal - Twin Aims: To achieve equity for **mothers and babies** from Black, Asian and Mixed ethnic groups, and those living in the most deprived areas.  
 To achieve equality and experience for staff from minority ethnic groups.  
**Phase 1** –November 2021 -Submitted Equity and Equality Gap analysis report for LLR to NHSE/I  
**Phase 2** – Develop co production plans based on gap analysis with key partners to include the wider determinants of health and map the assets of communities which help address the social determinants of health through multistakeholder engagement exercise and community engagement to identify key areas that will have high impact on the outcomes of mother and child. (JSNA; Population profiles; physical factors e.g., transport, deprivation, disability, needs of culturally diverse communities, areas of multiple deprivation.  
 9<sup>th</sup> June Multi stakeholder Workshop in collaboration with key system partners- to develop the shared vision and to identify key priorities that will have the highest impact on the outcomes of Mother and Child

**Sponsor, watch**

**Do**  
**Initial Priority Actions from Stakeholders event 9<sup>th</sup> June 2022**  
 1.Build on and develop further register of community assets.  
 2.Re launch Peer Support Programme- New pool of workforce  
 3.Focus on Preconception Health for public health interventions- Early Education in schools etc  
 4.Work under one roof- physically or virtually to create a 'One Stop Shop' for communities  
 5.Utilising community services( place based) - make the most of what we have- e.g. pop up clinics etc.  
These will be further developed following community engagement exercise and consultation with Task and finish group to set SMART actions ( short, medium and long term)

**Next steps**  
 June – July - Community engagement exercise to understand the needs of the communities and what they consider are priorities  
 June -July follow up with key stakeholders on their commitments for actions identified as part of Equity and Equity (Task and Finish group)  
 July - August - co produce Equity action plans across LLR with timelines for completion ( short term, medium term and long term ) over next 5 years  
 September – Submit our Equity and Equality action plans to NHSE/I.

**Sponsor, watch**

# JHWS Progress Update: Priority 2 Staying healthy and independent: prevention

| Priority update            |   | Reporting Period: Apr-Jun 2022 |   |                 |     |
|----------------------------|---|--------------------------------|---|-----------------|-----|
| <b>Priority Focus Area</b> | 'Socialising' the plan, increasing clarity around implementation priorities for Year 1.                 | <b>Overall Current</b>         | <b>Green</b>  | <b>Previous</b> | n/a |
| <b>Lead</b>                | Mike Sandys (HWB), Viv Robbins (Sandra Taylor) (IDG)  | <b>Decisions</b>               | <ul style="list-style-type: none"> <li>Communications and engagement plan approval/feedback</li> </ul>  |                 |     |
| <b>Objective</b>           | Empowering people to take a full role in maintaining good health and wellbeing, in healthy communities. | <b>Escalation issues</b>       | <ul style="list-style-type: none"> <li>None</li> </ul>  |                 |     |
| <b>Strategy Phase</b>      | Preparation   | <b>Other risks and issues</b>  | <ul style="list-style-type: none"> <li>Extending communications and engagement has resource implications which are being worked through. Rutland Information Service website also needs investment to fulfil its potential as a key information hub.</li> <li>Feedback is that volunteers are in short supply: looking at collective action to help to encourage people to come forward, also given the potential wellbeing benefit from this.</li> </ul> |                 |     |

## Achievements this period: Apr-Jun 2022

### Do

2.1 Active communities: Draft Joint Communication and Engagement Plan developed for July HWB – aims to make it easier for people to find out what's available to them, and get more involved in shaping services.

Support to VCS underway alongside a study into VCS development needs.

2.2 Staying well. Social prescribing platform has been procured. This will help to enhance the 'front door' into prevention services and how agencies work together to support individuals.

2.3 Take up of preventative health services. Targeted actions underway, notably GP practices contacting people who have not returned bowel cancer screening tests, to increase take-up.

2.4 Communities in which to thrive. Validated that RCC considers the health and wellbeing impact of its actions and policies. The aim is to extend this wider.

### Sponsor, watch

2.1 Active communities: The website supporting volunteering is live. Volunteer numbers are low relative to opportunities.

## Forward Plan for next period: Jul-Sep 2022

### Do

2.1 Active communities: Move into implementing the comms and engagement plan if approved by HWB. Progress the review of the development needs of the voluntary sector.

2.2 Staying well: Local implementation of the social prescribing platform to support social prescribers (RCC and PCN), public health, health and VCS to deliver wellbeing and prevention services efficiently to the public.

Development work on a stronger prevention front door for Rutland and defining requirements from the Rutland information Service website.

Progress training of 'making every contact count' trainers so we can locally increase the front line staff able to offer tailored recommendations to the public on boosting health and wellbeing.

### Sponsor, watch

2.1 Active communities: Explore joint actions around increasing volunteering.

# JHWS Progress Update: Priority 3 Living well with long term conditions and healthy ageing

| Priority update            |   | Reporting Period: Apr-Jun 2022 |   |                 |     |
|----------------------------|---|--------------------------------|---|-----------------|-----|
| <b>Priority Focus Area</b> | 'Socialising' the plan, increasing clarity around implementation priorities for Year 1. Refreshing connections across partners, identifying and progressing quick wins. | <b>Overall Current</b>         | <b>Green</b>  | <b>Previous</b> | n/a |
| <b>Lead</b>                | John Morley (HWB), Emma Jane Perkins (IDG)  | <b>Decisions</b>               |   |                 |     |
| <b>Objective</b>           | Timely and well-coordinated support enabling people living with ill health to live well, without ill health dominating, postponing deterioration, ageing well.          | <b>Escalation issues</b>       | For awareness: <a href="#">LLR Carers Strategy consultation</a> – ends 22 July. |                 |     |
| <b>Strategy Phase</b>      | Preparation   | <b>Other risks and issues</b>  |   |                 |     |

## Achievements this period: Apr-Jun 2022

Good progress has been made to confirm the scope of actions in this priority and a range of actions are already progressing well.

### Do

3.2.1 Early changes are enhancing integrated and multidisciplinary working, better supporting people with complex health needs e.g. integrating health and adult social care teams around therapy has improved the patient journey and reduced duplication of work by improved communication, upskilling of staff and a shared vision at manager level. Looking at rolling this successful model out wider across LLR.

3.2.4 Good hospital discharge performance – high reablement success and minimising use of interim beds means patients successfully going straight home.

### Sponsor, watch

3.1.2 Progressing approaches supporting people living with ill health e.g. via integrated care coordinator support and loan of GP blood pressure monitors for home management.

3.1.3 Active work on falls prevention in care homes, using a personalised approach for greater impact.

3.4.6 Additional local capacity to alleviate waits for dementia diagnosis – CCG funding additional posts in the LLR memory service (in recruitment) and part-funding pre- and peri-diagnosis support which AgeUK are delivering locally.

## Forward Plan for next period: Jul-Sep 2022

### Do

3.1.1 Looking at options for the 'prevention front door' in Rutland as the social prescribing platform comes into place.

3.2.4 Learning from outcomes of a 6 month nursing pilot.

3.3 Follow through on LLR carers consultation.

### Sponsor, watch

3.2.3 LLR Care Record ready to pilot with Rutland discharge team.

3.1.4 Looking at peer support opportunities for people living with ill health.

# JHWS Progress Update: Priority 4: Ensuring equitable access to services

| Priority update   |   | Reporting Period: Apr-Jun 2022   |              |                 |     |
|---|---|--|--------------|-----------------|-----|
| <b>Priority Focus Area</b>  | 'Socialising' the plan, increasing clarity around implementation priorities for Year 1.   | <b>Overall Current</b>   | <b>Green</b> | <b>Previous</b> | n/a |
| <b>Lead</b>   | Rachna Vyas (HWB), Debra Mitchell (Charlie Summers) (IDG)   | <b>Decisions</b>   |              |                 |     |
| <b>Objective</b>  | Improve access to services and wider opportunities for people less able to travel – e.g., via care closer to home, access to public transport, use of technology. | <b>Escalation issues</b>   |              |                 |     |
| <b>Strategy Phase</b>   | Preparation   | <b>Other risks and issues</b>  |              |                 |     |
| Achievements this period: Apr-Jun 2022  |   | Forward Plan for next period: Jul-Sep 2022   |              |                 |     |
| <p>Links being established with cross border partners. Task and finish group being established to look at cross border communication and linkages to the IT Infrastructure programme.</p> <p>PCN's inequality plan approved and focuses on patients who are housebound and/or frail and access to services.</p> <p>Direct targeting of patients is already being undertaken for 4 diagnostic tests locally. Once the local diagnostic offer is confirmed we will work to promote this.</p> <p>Comms and engagement group established - draft plan in review.<br/>Outline communications plan drafted.<br/>Primary care access survey undertaken by the LA in Sept 2021 and results will be fed in to overall access plans.</p> <p>Rutland Strategic Health Developments Project Board formed.<br/>First meeting planned for the INT development.<br/>Recruitment underway of ARRS staff and other supporting roles.</p> |   | <p>Agree priorities for the first year of the plan.</p> <p>Make linkages to the local and national IT infrastructure projects and identify key areas of concern for Rutland.</p> <p>Commence an Out of Area contract review of LLR CCG/ICB commissioned services</p> <p>Review local pathways, with focus on:</p> <ul style="list-style-type: none"> <li>a) Satellite clinics nearer to Rutland – e.g. Joint injections at RMH being explored to manage local backlog</li> <li>b) Community Pharmacy Consultation Service (CPCS) pilot to support increase in referrals in key areas and reduce pressures in Primary care. This will be supported by the Rutland Pharmaceutical Needs Assessment.</li> </ul> <p>Agree communications and engagement priorities for year one of the plan.</p> |              |                 |     |
| <b>Sponsor, watch</b>   |   | <b>Sponsor, watch</b>  |              |                 |     |

# JHWS Progress Update: Priority 5 Preparing for our growing and changing population

| Priority update   |  | Reporting Period: Apr-Jun 2022   |  |          |     |
|---|--|--|--|----------|-----|
| Priority Focus Area   | ‘Socialising’ the plan, increasing clarity around implementation priorities for Year 1. More detailed planning around future health and care infrastructure. | Overall Current  | Green  | Previous | n/a |
|   |  | Decisions  |  |          |     |
| Lead  | Sarah Prema (HWB), Joanna Clinton (Adhvait Sheth) (IDG)  | Escalation issues  |  |          |     |
| Objective   | Ensuring we have a health and care infrastructure and workforce fit for the future.  | Other risks and issues   | <ul style="list-style-type: none"> <li>Alternatives to achieving Levelling Up proposal aims and objectives will need to be considered if not successful at stage one. Risk of reduced scope and / or shift in timelines of improvement.</li> </ul> |          |     |
| Strategy Phase  | Preparation  |  |  |          |     |
| Achievements this period: Apr-Jun 2022  |  | Forward Plan for next period: Jul-Sep 2022   |  |          |     |
| <p>5.1 Planning and developing 'fit for the future' health and care infrastructure : Routine Dialogue and visibility of key neighbouring area plans in development. Senior cross border partnership representation agreed for C&amp;P north place partnership group. Awaiting establishment of LLR collaboratives to support alignment with wider LLR elective plans. In principle RCC Cabinet support for wider investment in healthcare via Levelling Up Opportunity for RMH if included in submission. Draft proposal and in principle support from partners being sought. RMH site feasibility underway.</p> <p>5.2 Health and care workforce fit for the future. Additional roles recruitment and new ways of working in development. Draft LLR workforce plan in development. Career opportunities engagement with local educational settings by local teams in train.</p> <p>5.3 Health and equity in all policies: Initial engagement is taking place across partnership to inform local plan developments.</p> |  | <p>5.1 Finalise stage Levelling Up Proposal and submit for consideration. Review findings of RMH feasibility Study. Obtain in principle support of Submission of Stage One Levelling Up Proposal from all key partners.</p> <p>5.2 Health and care workforce fit for the future: Discussions planned to develop programme of educational and other settings for engagement</p> <p>5.3 Health and equity in all policies:</p> |  |          |     |

# JHWS Progress Update: Priority 6 Ensuring people are well supported in the last phase of their lives

| Priority update            |   | Reporting Period: Apr-Jul 2022 |   |                 |     |
|----------------------------|---|--------------------------------|---|-----------------|-----|
| <b>Priority Focus Area</b> | 'Socialising' the plan with partners, increasing clarity around implementation priorities for Year 1. Understanding needs and current services.     | <b>Overall Current</b>         | <b>Green</b>  | <b>Previous</b> | n/a |
| <b>Lead</b>                | Dr James Burden (HWB), Charlie Summers (IDG)  | <b>Decisions</b>               | <ul style="list-style-type: none"> <li>n/a</li> </ul>   |                 |     |
| <b>Objective</b>           | Support individuals, their families and carers, in achieving their wishes around end of life care and ensuring they are informed to make decisions. | <b>Escalation issues</b>       | <ul style="list-style-type: none"> <li>Awareness of <a href="#">survey of carer and workforce experiences of end of life care</a>. Closing 6 July.</li> </ul> |                 |     |
| <b>Strategy Phase</b>      | <b>Preparation</b>  | <b>Other risks and issues</b>  |   |                 |     |

## Achievements this period: Apr-Jun 2022

**Do**  
 Analysis underway by Public Health of end of life care needs and services, including a survey of carers and workforce experience of end of life care in Rutland. Will help to inform future actions.

Linkages being made to the LLR end of life and palliative care task force. Exploration of expansion of compassionate communities.

JSNA chapter on end of life in preparation. Engagement survey of carers and workforce underway.

## Forward Plan for next period: Jul-Sep 2022

**Do**  
 Linking end of life in to the review of RMH and understanding local provision. Identification of local hospices and commissioning arrangements in place.

Identification of bereavement support in and around Rutland. Link with VSC contracts lead at CCG.

Explore the possibility of delivering more end of life care services closer to home, with consideration for the use of the Rutland Memorial Hospital. Also consider out of hours palliative care access for Rutland patients, family and carers.

Further develop the Dying Matters website to support coordination and choice of End of Life services.

# JHWS Progress Update: Priority 7.1 Mental Health

| Priority update  |                                      | Reporting Period: Apr-Jul 2022  |  |                 |     |  |
|--|--------------------------------------|---|--|-----------------|-----|--|
| <b>Priority Focus Area</b><br>Establishing the team and approach. ‘Socialising’ the plan, increasing clarity around implementation priorities for Year 1. System-wide workshops on approach to Mental Health.                              | <b>Lead</b><br>TBC (HWB), TBC (IDG)  | <b>Overall Current</b>  | <b>Green</b>   | <b>Previous</b> | n/a |  |
|  |                                      | <b>Decisions</b>  | n/a  |                 |     |  |
|  |                                      | <b>Escalation issues</b>  | n/a  |                 |     |  |
|  |                                      | <b>Other risks and issues</b>   | <ul style="list-style-type: none"> <li>Challenges in recruitment of Neighbourhood Mental Health Lead role</li> </ul> |                 |     |  |
| <b>Objective</b><br>Supporting delivery of mental health prevention, care and treatment services that improve local patient experience and outcomes.   | <b>Strategy Phase</b><br>Preparation |   |  |                 |     |  |
| Achievements this period: Apr-Jun 2022   |                                      | Forward Plan for next period: Jul-Sep 2022  |  |                 |     |  |
| <b>Do</b><br>7.1.6 – Agreement of physical space for Vita Minds to deliver support from within Rutland.<br>7.1.6 – Resources agreed and transferred to Rutland Council by CCG to support development of prevention and resilience schemes. |                                      | <b>Do</b><br>7.1.4 – Procurement of crisis café for Rutland.<br>7.1.4 – Rutland officer involvement in Round 2 panels of ‘Getting help in neighbourhoods’ VCS grant scheme (September)<br>7.1.5 –Recruitment of Peer Support Worker, seeking to appoint x1 PSW for Rutland<br>7.1.6 – Commencement of Rutland innovation site for integrated mental health neighbourhoods, working with Partners 4 Change, developing 3 Conversation/strength based approach.<br>7.1.6 – Mental health workforce planning for Rutland in collaboration with LPT.<br>7.1.6 – Commence recruitment of additional ARRS role to work with the PCN and closely with RISE team. |  |                 |     |  |
| <b>Sponsor, watch</b>  |                                      | <b>Sponsor, watch</b>   |  |                 |     |  |

# JHWS Progress Update: Priority 7.2 Reducing health inequalities 7.3 Pandemic recovery and readiness

| Priority update            |  | Reporting Period: Apr-Jul 2022 |   |                 |     |
|----------------------------|--|--------------------------------|---|-----------------|-----|
| <b>Priority Focus Area</b> | 'Socialising' the plan, increasing clarity around implementation priorities for Year 1.<br>Analysis into Rutland health inequalities well advanced – will support future intervention design and prioritisation. | <b>Overall Current</b>         | <b>Green</b>  | <b>Previous</b> | n/a |
|                            |  | <b>Decisions</b>               | n/a   |                 |     |
|                            |  | <b>Escalation issues</b>       | n/a   |                 |     |
|                            |  | <b>Other risks and issues</b>  | Awaiting Census data for parts of the analysis. Expected summer 2022. |                 |     |
| <b>Lead</b>                | Mike Sandys (HWB), Viv Robbins (IDG)   |                                |   |                 |     |
| <b>Objective</b>           | To understand and reduce health inequalities in Rutland, including relating to the armed forces, including through a proportionate universalism approach.<br>To ensure Covid-19 recovery and pandemic readiness. |                                |   |                 |     |
| <b>Strategy Phase</b>      | Preparation  |                                |   |                 |     |

## Achievements this period: Apr-Jun 2022

**Do**  
 7.2.1. Health Inequalities Joint Strategic Needs Assessment chapter well underway.  
 7.2.5. Work underway on reviewing the health needs of military and veteran populations across LLR.

**Sponsor, watch**  
 7.2.2,3 & 7- Leicestershire Partnership Trust development session on strengthening prevention and health inequalities. Looking to develop further sessions with other large NHS providers.

## Forward Plan for next period: Jul-Sep 2022

**Do**  
 7.2.1. Finalise the Health Inequalities Joint Strategic Needs Assessment chapter for presentation at the October HWB.  
 7.2.5. Further develop the LLR military and veterans needs assessment and link to the wider Rutland Health Inequalities Needs Assessment.

**Sponsor, watch**  
 7.2. Refine LLR Health Inequalities Framework to include the NHS Core20Plus5 approach and look to develop a system action plan.