



**Prosperous Communities
Committee**

Date: 18th July 2017

**Subject: Health Commission six month position update – Recommendations
from Challenge and Improvement Committee**

Report by:

Chief Operating Officer

Contact Officer:

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Purpose / Summary:

To present to Prosperous Communities Committee, recommendations agreed at Challenge and Improvement Committee on 27th June 2017 further to a position update on the activity of the health commission since January 2017

The position update presented to Challenge and Improvement Committee is included at Appendix 1 of this report

RECOMMENDATION(S):

Members of Prosperous Communities Committee are asked to agree the following recommendations supported by Challenge and Improvement Committee on 27th June 2017:

- 1. To formally request additional district council representation at the Lincolnshire health and wellbeing board and determine whether;**
 - a. A formal request will be made by WLDC in isolation, via a letter from the chair of the Prosperous Communities Committee and Health Commission or;**
 - b. The Chair of Prosperous Communities Committee and Health Commission should seek the collective support of the other six district councils to write to the Health and Wellbeing Board collectively**

2. Agree to continue the work of the health commission, and to recommend a review every six months to determine the progress, outcomes and future need and remit of the Health Commission

IMPLICATIONS

Legal: None arising from this report

Financial: FIN/42/18

None arising from this report.

Staffing: None arising from this report

Equality and Diversity including Human Rights: None arising from this report

Risk Assessment: Not applicable

Climate Related Risks and Opportunities: Not applicable

Title and Location of any Background Papers used in the preparation of this report:

Report presented to Challenge and Improvement Committee on 27th June 2017 – ‘Health Commission, 6 month position update’. Attached at Appendix 1.

Call in and Urgency:

Is the decision one which Rule 14.7 of the Scrutiny Procedure Rules apply?

i.e. is the report exempt from being called in due to urgency (in consultation with C&I chairman)

Yes

No

X

Key Decision:

A matter which affects two or more wards, or has significant financial implications

Yes

No

X

End of Report



Report Number:

Committee: Challenge and Improvement Committee

Date: 27th June 2017

Subject: Health Commission – Six Month Position Update

Report by:

Chief Operating Officer

Contact Officer:

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Purpose / Summary:

To present a position update on the activity of the health commission since January 2017

RECOMMENDATION(S):

Members of Challenge and Improvement Committee are asked to:

- 1. Consider including 'Neighbourhood Networks' as an item for the C&I workplan over the coming year as part of the review of the Health Commissions work which is set out in that work plan**
- 2. Support a recommendation to Prosperous Communities Committee to formally request additional district council representation at the Lincolnshire health and wellbeing board**
- 3. Support a recommendation to Prosperous Communities Committee to continue the work of the health commission, and to recommend a review every six months to determine the progress, outcomes and future need and remit of the Health Commission**

IMPLICATIONS

Legal: None arising from this report

Financial: FIN/34/18
None arising from this report.

Staffing: None arising from this report

Equality and Diversity including Human Rights: None arising from this report

Risk Assessment: Not applicable

Climate Related Risks and Opportunities: Not applicable

Title and Location of any Background Papers used in the preparation of this report:
None

Call in and Urgency:

Is the decision one which Rule 14.7 of the Scrutiny Procedure Rules apply?

i.e. is the report exempt from being called in due to urgency (in consultation with C&I chairman)

Yes

No

Key Decision:

A matter which affects two or more wards, or has significant financial implications

Yes

No

1. Background

- 1.1 Whilst the council does not directly provide health services and this is not a statutory area of work, as a district council we have an important role to play in understanding and improving the health and wellbeing of our residents in our role as a community leader.
- 1.2 Health is determined by many factors other than health care provision. District councils are in a good position to influence many of these factors through their key functions and in their wider role supporting communities and influencing other bodies. Additionally, it is recognised that district councils have an opportunity to be better integrated into health and social care policy in order to improve outcomes for local residents
- 1.3 The Council has recognised this important role within its Corporate Plan 2016-2020 as part of its commitment to 'people first', noting that *"ensuring that we understand and meet the needs of our residents is what the Council is all about...from enabling convenient and appropriate access to services; joined up where appropriate, providing cultural, leisure and arts facilities, working to provide suitable housing across the District and promoting and supporting wellbeing, healthy lifestyles and safe, vibrant communities"* (WLDC Corporate Plan 2016 – 2020)
- 1.4 In 2016, and primarily following feedback from communities and GP's, elected members became aware of a number of concerns about health, wellbeing and health care provision affecting West Lindsey residents. Subsequently, members led the development of the West Lindsey Health Commission. The Health Commission seeks to be part of the solution to improving the health and wellbeing of communities in West Lindsey.
- 1.5 The Health Commission was established in December 2016 and has been actively working to achieve in line with the agreed scope and Terms of Reference since January 2017. A link to the terms of reference can be found below.



WLDC Health
Commission ToR.pdf

- 1.6 In line with the agreed scope and the thematic areas agreed by members, the Health Commission continues to coordinate member led activity for the purposes of achieving the following outcomes:
- Better Council understanding of health and wellbeing issues and the role we can play to address them
 - Recommendations to various bodies including the Council on future policy and action, particularly partnership opportunities with health services and the community to particularly improve community action, housing, leisure and well being
- 1.7 The Health Commission is supported by and has been working closely alongside the council's Health Coordinator and Home Choices Team Manager.
- 1.8 The Health Commission has now been operational for six months. The Health Commission is working well, with individual members leading on the thematic areas

as agreed and reporting back to the Commission. There is an opportunity to increase the membership of the health commission if that is required by members.

2. Health Commission Position Update

2.1 This report provides a position update on progress and achievements to date.

2.2 It builds on the information previously included within the Annual Report to Council, within which it was reported that:

2.2.1 *“In the short time that the health commission have been established, there has been an emphasis on working with partners to improve health and wellbeing outcomes for residents of West Lindsey. Building those relationships and establishing the health commission has been the primary focus to date”*

2.3 The key activities of the Health Commission since its inception are set out below.

2.3.1 Engaging Key Stakeholders – Roundtable Event

A roundtable event held in April 2017 brought together Chief Officers from each of the Health Trusts; the Vice-Chairman of the Health & Wellbeing Board; representatives from the South West Clinical Commissioning Group (CCG); Healthwatch, Ken Woolley and other representatives of the NHS as well as the members of the Health Commission.

The level of interest and engagement in this event demonstrated the value placed on West Lindsey’s role in improving health and wellbeing outcomes. Achieving this representation is a considerable achievement and followed continued positive work with senior health colleagues to support their shifting mind set to one of prevention and engagement with a wider range of stakeholders outside of the health sector.

The event allowed members and officers to set the context for the council’s role in health and wellbeing. Within this event was a lively exchange of comments and ideas and enabled each stakeholder to better understand the role that we as a district council can play and allows a focus on how we can be better integrated and involved; particularly emphasising the role we can play in prevention and early intervention.

This meeting identified a series of actions to be undertaken by those present and it was agreed that a further meeting in September to follow-up would be beneficial.

A number of the actions agreed are in progress, with many of these forming part of the work plan for the Health Coordinator, working closely with members of the Health Commission.

2.3.2 Supporting Development of the Gainsborough Locality Neighbourhood Team

The development of a neighbourhood team (multi-disciplinary approach to improving health outcomes) is actively underway in West Lindsey, for the Gainsborough locality. Following the roundtable event, we are actively involved in the development of this key programme of work for Gainsborough. A number of pilot projects are planned as part of this work including a social prescribing pilot (which encourages GP’s to prescribe ‘non-medical’ interventions) and ‘project Gainsborough’ which seeks to layer the various data sets held by health

and other stakeholders to enable targeting of resources to best meet the health needs of the local population.

It is recommended that the neighbourhood team development would be a valuable subject area for the Challenge and Improvement Committee workplan over the next 12 months as part of the general review of the work of the Commission which is already part of the Committees work plan for this year.

2.3.3 Member and Officer Collaboration and Support

A key strength of the work of the health commission is the collaborative approach between officers and members.

Having the health commission as a mechanism to guide and shape key projects, for example; the wellbeing service procurement, is much appreciated by officers. Approval at Prosperous Communities Committee in March 2017 for the Health Commission to provide guidance to officers in respect of the development of this project has proven to be valuable. Officers consider that this guidance and the engagement of the Commission with stakeholders to understand the health and wellbeing needs of the district strengthened the subsequent initial bid.

Similarly, the role of Health Coordinator has been described by the health commission as invaluable.

2.3.4 Rural Weighting Allowance

A motion passed by [Full Council on 23rd January 2017](#) in respect of lobbying for a rural weighting allowance for GP's and seeking support from other local authorities has been well received nationally and taken up by authorities as diverse as Torrington in Devon, and Battle in East Sussex. It has also received support from the Rural Services Network and Cllr. Owen Bierley continues to work with the RSN nationally to promote fresh approaches to the provision of health services in rural areas.

2.3.5 Health and Wellbeing Board

There has been a lot of work by officers and members to ensure that relationships and engagement with the Health and Wellbeing Board (HWBB) is developed.

Currently, the district councils are represented at the HWBB by a single elected member from across the seven district councils. Whilst all districts engage with a 'pre-meet' to work through the agenda, reports and to discuss our respective positions with the representative member before each meeting, members of the Health Commission are concerned that having a single representative does not allow for local needs to be truly understood or represented. This view is shared by district council colleagues across Lincolnshire.

It is recommended that Challenge & Improvement Committee support a recommendation to the Prosperous Communities Committee to progress a formal request to the Health & Wellbeing Board for additional district council (elected member) representation on the board.

The Health and Wellbeing Board has agreed to establish a housing, health and care sub group which will be key to driving forward this agenda. It is recommended that further information in respect of this sub group is presented to the Health Commission to ensure that WLDC is fully aware of and is able to play a role in shaping this work and associated outcomes.

The next Lincolnshire Health and Wellbeing Strategy is currently in development, following the finalisation of the Joint Strategic Needs Assessment for Lincolnshire. A number of consultation events to determine the priorities for the new strategy are planned by health colleagues. Details of these sessions can be provided, should members wish to attend.

2.3.6 Lincolnshire Health Scrutiny Committee

Cllr. Paul Howitt-Cowan is WLDC's representative on this, providing a direct link between the main scrutiny committee and the Health Commission with regular updates and a flow of information.

2.3.7 Embedding Health and Wellbeing Considerations in WLDC Services

One area of concern identified is the need within the council to raise the level of awareness regarding social and environmental issues affecting health and wellbeing and for the various departments within the Authority to use health as a lens when considering actions.

Examples are the role of health and wellbeing which are covered in the Central Lincolnshire Local Plan, Neighbourhood Plans, as well as the work currently being done regarding Green Spaces within the District, and the development of Leisure facilities.

This action is being progressed by the councils Health Coordinator who has started to engage with relevant departments to explore this.

3. Summary

3.1 The role of the Health Commission is continually evolving and is gaining both momentum and positive reputation. The district council profile and role in developing and support the health and care agenda is important and presents significant opportunity to improve health and wellbeing outcomes for West Lindsey residents.

3.2 It is considered important to discuss the longevity of the health commission at this stage so that it is not constrained by its status as a 'task and finish' group but can extend beyond the currently agreed period so that it can properly understand longer term needs and ensure that WLDC is integrated positively and effectively in the housing, health and care agenda that is developing in Lincolnshire.

3.3 Challenge and Improvement Committee is asked to support a recommendation to Prosperous Communities Committee to extend the Health Commission beyond its currently agreed period.