
CASTLE POINT AND ROCHFORD HEALTH AND WELLBEING BOARD

1 SUMMARY

- 1.1 This report provides Members with details of the function, role and purpose of the Joint Castle Point and Rochford Health & Wellbeing Board (CP&RHWB), which was set up in December 2011.

2 INTRODUCTION

- 2.1 CP&RHWB is a non-statutory multi-agency partnership which brings together, at a local level, the different organisations working in the public, community and voluntary sectors that are engaged in improving the health and wellbeing of residents.

3 ROLE AND PURPOSE OF THE CP&RHWB

- 3.1 The purpose of the Board is:-

- to secure better health and wellbeing outcomes in Castle Point & Rochford
- to reduce health inequalities
- to ensure a better quality of care for all patients and care users.

This will be achieved through partnership working and exploring opportunities for joint commissioning across the NHS, social care, district councils, public health, voluntary sector and other services (that are directly related to health and wellbeing).

- 3.2 The Board is responsible for:-

- Overseeing Local Health Improvement and Public Health activity
- Overseeing strategic needs assessment work for Castle Point Borough Council and Rochford District Council
- Exploring opportunities for Joint Commissioning and the integration of Services:-
 - To reflect back to centre, report and input into central commissioning/integration decisions
 - To pick up any local commissioning/integration activity
- Providing a forum for information gathering/awareness raising for local GP Clinical Commissioning Groups.
- Delivering a work programme directly informed by the District's health and wellbeing priorities identified by the Joint Strategic Needs Assessment and other appropriate sources.
- Supporting the delivery of local strategic objectives developed by the Joint Local Strategic Partnership relating to the resident population.

3.3 The membership of CP&RHWB is as follows:

Health Representatives:-

- Primary Care & Partnerships (or equivalent)
- Children's, Adult & Mental Health Services
- Public Health
- NHS South Essex
- SEPT

Social Care Representatives:-

- Children's Services
- Adult Services

Voluntary Sector Representative:-

- 1 for Castle Point Association for Voluntary Service
- 1 for Rayleigh, Rochford & District Association for Voluntary Service

Patients Representative:-

GP Clinical Commissioning Group Representatives:

- 1 for Castle Point BC
- 1 for Rochford DC
-

Portfolio Holder Representatives:-

- 1 for Castle Point BC
- 1 for Rochford DC

L.A. Officers Representatives:-

- Chief Executive from Castle Point BC and Rochford DC. Other officers as required.

3.4 Key decision-making and power rests with the statutory county-wide Health and Wellbeing Board. The CP&RHWB receives update reports from the County Board at every meeting. Any comments locally are fed up to the County Board.

3.5 CP&RHWB has used the Joint Strategic Needs Assessment 2012 (JSNA), produced by Essex County Council in partnership with Public Health as the basis for identifying priorities within the locality. The JSNA had been a statutory duty on Primary Care Trusts and upper tier local authorities since 2007.

Aimed at commissioners and policy makers, the JSNA provides a comprehensive picture of the current and future health and wellbeing needs of the population and informs commissioning in order to achieve better outcomes and reduce inequalities.

3.6 The JSNA identified the following priorities for the locality:-

- The ageing population and dementia care
- People with long-term conditions
- Adult workforce qualifications
- Young people not in education, employment or training (NEETS)

The third and fourth priorities on the above list are linked to the prevention of poor health and wellbeing. If adults and young people have low levels of education and qualifications they are less likely to enjoy a good lifestyle and wellbeing.

At a period of limited resource the CP&RHWB has elected to focus on one issue at the current time: Dementia and Carers. A working group has been set up to explore how responding to this condition and the support provided to carers can be better co-ordinated across all partner agencies. To date, carer organisations have now been engaged to consider the challenges faced by those members of our community who care for those people living with Dementia. Legacy work in the districts has been considered and meetings have taken place with Commissioners. A Befriending Scheme run by the Castle Point Association of Voluntary Services has also been set up and works across both Castle Point and Rochford.

Other sub-groups of the LSP will also be working on these priorities so they are not exclusively within the remit of the CP&RHWB.

A training session on the JSNA priorities was held for all Members in November 2012.

The CP&RHWB does not get any funding to carry out its activities.

There also exists the drive, through the Whole Essex Community Budget project, for joint commissioning and the integration of services. There is agreement between public service authorities and service users that there is fragmentation and duplication of resource utilisation in the health and wellbeing system and that integration of health and social care is the right way forward. As this project develops there may be opportunities for CP&RHWB to become more involved in this agenda.

4 RISK IMPLICATIONS

- 4.1 At a time of limited resources, it is vital that the Council continues to engage effectively in key partnerships. The effectiveness of the CP&RHWB is an operational and reputational risk to the Council. If the CP&RHWB performs well, that is likely to have a positive impact on the work of the Council and residents within the District.

5 RESOURCE IMPLICATIONS

- 5.1 Staff from across the authority will be regularly or periodically involved in the work of the CP&RHWB.

6 RECOMMENDATION

- 6.1 It is proposed that the Committee **RESOLVES** to note the contents of the report.

Paul Warren

Chief Executive

Background Papers:-

None

Phone: 01702 318162

Email: Claudia.mcclellan@rochford.gov.uk

If you would like this report in large print, Braille or another language please contact 01702 318111.