



**HAMPSHIRE COUNTY COUNCIL**

**HAMPSHIRE HEALTH AND WELLBEING BOARD**

**Report**

<b>Committee:</b>	Health and Wellbeing Board
<b>Date:</b>	5 October 2017
<b>Title:</b>	Report of the District Health and Wellbeing Forum
<b>Report From:</b>	Councillor Anne Crampton, Chair of the District Forum

**1. Summary**

- 1.1. This report provides an update on the work of the District Health and Wellbeing Forum which was set up as a subgroup of the Hampshire Health and Wellbeing Board. It has been established that there should be better two-way communication between the Forum and its parent Board so that the Forum is properly aligned with and delivering against the Hampshire Health and Wellbeing Strategy priorities and so that the Board can understand how its own members can support delivery of health and health inequalities outcomes at district level.

**2. Defining the role of the Forum**

- 2.1. The Forum met most recently on 19 September 2017. The Forum agreed its Terms of Reference and its main role: to lead on the Healthy Communities ambitions of the Hampshire Health and Wellbeing Strategy and to link with other subgroups to champion the role of district councils in delivering wider Strategy objectives (Starting, Living and Ageing Well). The District Forum is now represented at each of the other 3 subgroups, and reports back to from these groups will be a standing item on the Forum agenda; Forum members will be asked to participate in the programs and projects of these subgroups.
- 2.2. The Terms of Reference refer explicitly to the 'skills and facilities already present in our Communities'. This reflects the asset-based approach (as opposed to a deficit model) to our work as well as the role of local councils and other organisations in making crucial links between fragmented constituent parts of the health and social care system often commissioned at scale across large geographies.
- 2.3. District councils have a good opportunity to impact on the key determinants of health: housing, leisure, the built and natural environment, community safety, incomes, employment, transport, air and water quality. District councils can also play a role in prevention and early intervention; district councils have

contact with residents on a range of issues which present opportunities for brief interventions or signposting to useful sources of information such as 'Connect to Support'. As the pattern of ill health widens from single illnesses to multiple conditions including mental health issues, District councils should form part of the way in which the public and voluntary sector manages demand by responding better to 'whole person' problems.

- 2.4. The Terms of Reference require the Forum to work with others; this should be a 'two-way street', which requires other HHWB organisations to be ready to collaborate with the Forum. District councils will not achieve the HHWB ambition to reduce health inequalities on their own. This matter warrants further partnership discussion in light of recent publication of proposals for budget and service reductions and changes at Hampshire County Council. Of particular concern are the Health Impacts of decreases in Community Transport services, which currently help many to access services that keep them well and independent and reduce costs for the health and care system
- 2.5. The joining of health and planning is a key priority area for the Forum and has been led by HCC Public Health. Forum members are committed to working towards having planning policies in place which maximise the health of current and future residents. Supplementary Planning Documents, Public health responses to major planning applications and Health Impact Assessments are all useful tools to achieve this, as in the case of the development proposals at Manydown.
- 2.6. Forum members will also deploy green infrastructure and leisure assets to meet physical health and mental wellbeing objectives particularly for those who are currently inactive.

### **3. Finance**

- 3.1. This report has no financial implications for the Board. Districts make a significant contribution towards improving and protecting the health and wellbeing of Hampshire residents through both statutory and non-statutory functions (where they are carried out), preventing an even higher cost burden on NHS, social care and other budgets. The District Forum has no budget and no infrastructure support funded from Hampshire County Council or the Hampshire Health and Wellbeing Board; infrastructure support is provided by members of the Forum in kind (currently Hart District Council and Eastleigh Borough Council). (The Forum is grateful for the role of HCC Public Health in providing briefings and advice to the Forum.)

### **4. Recommendations**

- 4.1. It is recommended that the Hampshire Health and Wellbeing Board notes and comments on the ongoing development of the role for the Districts Forum.

## CORPORATE OR LEGAL INFORMATION:

### Links to the Strategic Plan

<b>Hampshire maintains strong and sustainable economic growth and prosperity:</b>	Yes
<b>People in Hampshire live safe, healthy and independent lives:</b>	Yes
<b>People in Hampshire enjoy a rich and diverse environment:</b>	Yes
<b>People in Hampshire enjoy being part of strong, inclusive communities:</b>	Yes

### Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document

Location

None

## **IMPACT ASSESSMENTS:**

### **1. Equality Duty**

1.1. The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;

Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;

Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

#### **Due regard in this context involves having due regard in particular to:**

The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;

Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;

Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

### **1.2. Equalities Impact Assessment:**

District Councils also have a duty under Section 149 of the Equality Act 2010 and can go further in meeting this duty by working with the support of members of the Hampshire Health and Wellbeing Board, particularly in relation to health inequalities.

### **2. Impact on Crime and Disorder:**

2.1. There is a dynamic relationship between health and wellbeing and crime and disorder. The safety of neighbourhoods is a key determinant of health and wellbeing. Improved health can enhance resilience to address (perceptions of) crime and antisocial behaviour.