

REPORT TO:	Cabinet
DATE:	Monday 4 th July 2022
SUBJECT:	Development of the South and East Lincolnshire Healthy Living Board to Support the Co-ordination of the Health and Well-Being, Leisure and Culture Offer in the Sub-Region.
PURPOSE:	<p>To seek approval to the terms by which the South and East Lincolnshire Healthy Living Board are established and to provide delegated authority for the Deputy Chief Executive (Communities) to finalise with the Executive Leads for Health and Well Being, Leisure and Culture through the newly established 'Healthy Living Board' a:-</p> <ul style="list-style-type: none">a) a Healthy Living Action Plan for the Sub-Regionb) programme for the Sub-Regions Leisure and Culture Offer
PORTFOLIO HOLDER:	<p><u>Health and Well-Being</u></p> <p>Councillor Griggs, Housing and Communities for Boston Borough Council</p> <p>Councillor Gray, Communities and Aging Better for East Lindsey District Council</p> <p>Councillor Sneath, Health & Wellbeing, Conservation & Heritage for South Holland District Council.</p> <p><u>Leisure and Culture</u></p> <p>Councillor Tracey Abbott, Portfolio Holder for Town Centre for Boston Borough Council</p> <p>Councillor Graham Marsh, Deputy Leader and Portfolio Holder for Partnerships</p> <p>Councillor Gary Taylor, Communities and Facilities, for South Holland District Council</p>
REPORT OF:	<p>John Leach, Deputy Chief Executive – Communities for Boston Borough Council, East Lindsey District Council and South Holland District Council.</p> <p>Emily Spicer, Assistant Director for Wellbeing and Community Leadership for Boston Borough Council, East Lindsey District Council and South Holland District Council</p>
REPORT AUTHOR:	

Phil Perry, Assistant Director for Leisure and Culture for Boston Borough Council, East Lindsey District Council and South Holland District Council

WARD(S) AFFECTED: All

SUMMARY

This report builds on Council's agreement on 12th May 2022 to establish a "Healthy Lives Priority Partnership" and confirms the proposed detail for this arrangement in the form of a Healthy Living Board (HLB) for South and East Lincolnshire that brings Partners together, each with an equal voice to focus on reducing health inequalities and improve health outcomes across the sub-region. In establishing the HLB in the way described within this report, it is also proposed that a key work-stream will be to support the development of a co-ordinated sub-regional offer for leisure and culture, for the benefit of the communities of South and East Lincolnshire and those who visit this important part of the world.

Many of the conversations that would take place at the proposed Healthy Living Board are already ongoing between Members, Partnership Officers and Partners however, the approach set out in this paper provides a more formalised framework to support that in line with the Partnership's governance structure. The proposals also recognise the changes being brought in through the Health and Care Act 2022, which received Royal Assent on 28th April, 2022 and the opportunities to bring great strength to local plans in relation to the levelling up agenda, the Towns Fund Projects and other initiatives by taking forward a sub-regional co-ordination role on matters relating to health and well-being, including leisure and culture.

This paper is written to complement activity relating to the establishment of an Integrated Care System across Lincolnshire.

RECOMMENDATIONS

- That Cabinet agrees to the detailed proposals provided within this report, supporting the establishment/intended role of the South and East Lincolnshire Healthy Living Board (Healthy Lives Priority Partnership) and the accompanying terms of reference.
- The Cabinet agrees to provide delegated authority for the Deputy Chief Executive (Communities) to finalise with the Executive Leads for Health and Well Being and Leisure and Culture through the 'Healthy Living Board' a:-
 - programme for the development of a Healthy Living Action Plan for the sub-region.
 - programme for the Sub-Regions Leisure and Culture Offer.

REASONS FOR RECOMMENDATIONS

The South and East Lincolnshire Healthy Living Board would create a more formalised arrangement for discussion between Strategic Partners across the sub-region. Whilst in many cases the conversations that would take place at the Board are taking place at present between Members, Partnership Officers and Partners informally, the establishment of the Board under the terms set out in this report would formalise that arrangement, provide a focus for resources and partnership effort within the sub-region and within the Partnership's governance structure.

OTHER OPTIONS CONSIDERED

To continue with current arrangements – this option has been discounted.

Whilst there are strong relationships between officers of the South & East Lincolnshire Councils Partnership and Strategic Partners that would be invited to join the Board, it is necessary to create a more formalised environment (on agreed terms) where Partners can contribute to strategies and action plans to improve outcomes for the strategic priorities relating to health and well-being in the sub-region.

1. BACKGROUND

- 1.1. As Members are aware the South and East Lincolnshire Councils Partnership that covers the three council areas of South Holland District Council, East Lindsey District Council and Boston Borough Council provides an opportunity to better address the issues that impact the most on the local communities that reside in the sub-region.
- 1.2. Whilst no issue can be taken in isolation this paper focuses on the health aspects of life within South and East Lincolnshire and proposes how a locally defined joined up response can be galvanised, as intended by Council (that agreed on 12th May 2022 to the establishment of a Healthy Lives Priority Partnership) in order to address the challenges to improved health outcomes faced across South and East Lincolnshire. Linked to this it also seeks to support the co-ordination of a sub-regional leisure and culture offer that positively contributes to the health and well-being agenda for this locality.

2. The Health of Communities Living within South and East Lincolnshire

- 2.1 It is clear from data relating to the health of those who live in South and East Lincolnshire that challenges include: -
 - Childhood obesity.
 - Poor levels of physical activity amongst adults.
 - Cardiovascular disease.
 - Reduced life expectancy.
 - Smoking particularly during pregnancy.
- 2.2 The following information further illustrates some of the health concerns of note locally across South and East Lincolnshire: -

East Lindsey District Council

 - One of the 20% most deprived local authorities in the country.
 - Life expectancy at birth (male) is 77.8 years compared 79.4 years at a regional level and 79.6 years for England.
 - Life expectancy at birth (female) is 82 years compared to 82.9 years at a regional level and 83.2 years for England.

- The percentage of people who smoke during pregnancy is 20% compared to 10.6% across England.
- The mortality rate for all cardiovascular diseases has a value of 92 (per 100,000) compared to a regional value of 73.5 compared to 71.7 for England.
- Percentage of physically active adults is 59.5% compared at a regional level of 65.7% and an England value of 66.3%.

South Holland District Council

- Prevalence of obesity in children (year 6) (including severe obesity) for the year 2018–19, is 23.3% compared to an England value of 20.2%.
- The percentage of people smoking during pregnancy is 14.4% compared to an England value of 10.6%.
- The mortality rate for all cardiovascular diseases has a value of 85.5 (per 100,000) compared to a regional value of 73.5 and an England value of 71.7.
- The percentage of physically active adults is 58.8% compared at a regional level of 65.7% and an England value of 66.3%.

Boston Borough Council

- Prevalence of obesity in children (year 6) for the year 2018-19, 27.1% compared to 20.2% England and 19.7% regional.
- Under 75 mortality rate from all causes 392.9 (per 100,000) compared to a regional value of 334.4 and an England value of 330.5.
- The Tuberculous Incidence rate (2016-18) is 14.6 compared to a regional value of 7.19 and an England value of 9.19.
- The mortality rate for all cardiovascular diseases has a value of 95.8 (per 100,000) compared to a regional value of 73.5 and 71.7 for England.
- The percentage of physically active adults is 70.5% compared at a regional level of 64.4% and an England value of 62%.

This overview information has been extracted from the published data set within the Local Authority Health Profile 2019 for each district and contains data sets ranging between 2015-2019.

3. The Health and Care Act 2022

3.1 The Health and Care Act received Royal Assent on 28th April 2022. As part of measures to deliver more joined-up care, every part of England will be covered by an integrated care system (ICS) bringing

together NHS, local government and wider system partners to put collaboration and partnership at the heart of healthcare planning. Through the Act 42 Integrated Care Systems have been put on a statutory footing for a 1st July implementation date.

3.2 The four core purposes of the ICS are: -

- Improve outcomes in population health and healthcare
- Tackle inequalities in outcomes, experience and access
- Enhance productivity and value for money
- Help the NHS support broader social and economic development.

3.3 Each ICS is to be led by an NHS Integrated Care Board (ICB), **an organisation** with responsibility for NHS functions and budgets, and an Integrated Care Partnership (ICP), **a statutory committee** (not a statutory body) bringing together all system partners to produce a health and care strategy. Its members can come together to take decisions on an integrated care strategy, but it does not take on functions from other parts of the system. When ICBs are legally established, clinical commissioning groups (CCGs) will be abolished.

3.4 The ICP is required to develop an Integrated Care Strategy - existing Joint Health and Well Being Strategies may be considered a good starting point from which to build. The ICB and local authority (Lincolnshire County Council) are required to have regard to the ICP's strategy when making decisions, commissioning and delivering services. It is understood locally that the functions of the Integrated Care Partnership (ICP) are to be aligned with the Lincolnshire Health and Wellbeing Board where practicable.

3.5 The Health and Care Act does not make any substantial changes to the establishment, functions or duties of Health and Wellbeing Boards.

3.6 In Lincolnshire it is understood that the name of the ICS is to be "Better Lives Lincolnshire". The ICB is to be NHS Lincolnshire Integrated Care Board and the ICP is to be Lincolnshire Integrated Care Partnership.

4. Levelling Up and Health Disparities

4.1 The government published the levelling up white paper on 2 February 2022, setting out a broad, missions-led approach to rebalancing the UK economy and addressing significant regional inequalities that hold back people, places and prosperity.

4.2 One of the missions explicitly refers to the need to narrow the gap in healthy life expectancy (HLE) between local areas. A white paper on health disparities will be published this year, setting out an

ambition for reducing the gap in health outcomes. The government has launched two independent reviews to feed into this.

4.3 More broadly, the levelling up white paper is an important framing document for integrated care system and NHS leaders, local government and other leaders across the country. Many of the missions will have direct and indirect implications for service demand, population health, workforce supply, innovation and local partnerships. It is therefore really important that work relating to improve health and well-being is fully joined up with this activity.

5. A Partnership Response to Improved Health Outcomes in South and East Lincolnshire

5.1 The establishment of the South and East Lincolnshire Councils Partnership on 1st October 2021 provides a sub-regional opportunity to galvanise cross agency support to address health related matters in South and East Lincolnshire. The model focuses on local identity, local services, local communities and local people, recognising within its creation that the three district councils within the partnership offer services that strike at the very heart of health and other community related concerns.

5.2 From a health perspective the local authorities responsibilities cover services such as leisure, culture, housing, environmental health and other preventative regulatory services alongside the provision of key facilities such as parks and open spaces and a key role in driving up prosperity through economic growth with other key partners.

5.3 On 12th May 2022 East Lindsey District Council agreed to the establishment of a priority partnership of key agencies/bodies that looked at supporting (amongst other priority areas) healthy lives. This is being taken forward in the form of a Healthy Living Board for South and East Lincolnshire and the more detailed proposals for its development are discussed in this report. The proposed remit of the board is to ensure better co-ordination on health-related matters within the sub-region to support the ambitions of the new Integrated Care System. A main objective of the Board is to co-ordinate and drive the delivery of local service provision by working together to improve outcomes for communities. **The Board developed would be discreet to the issues of the sub-region and wouldn't seek to replace or compete with existing Partnership Boards operating across Lincolnshire.**

5.4 Appendix A provides the draft terms of reference for the Board including its suggested membership. The Board offers a formalised mechanism for strategic partners to work together collectively to agree solutions to the wider determinants of health, health inequalities and deprivation across the sub-region, aligning resources and action plans accordingly. It also provides an opportunity to help facilitate the co-ordination of the three councils' leisure and culture offer that plays a key role in positively contributing to people's health and well-being.

5.5 Whilst collaborative working between many of the strategic partners is ongoing, the creation of the Board will formalise this arrangement and ensure all strategic partners who contribute towards addressing health inequalities have the opportunity to engage and influence.

5.6 In practical terms, as well as considering joint approaches to issues, aligning resources and planning action; the Board would also have the ability to:

- Respond jointly to consultations in relation to policy and services impacting the sub-region.
- Lobby on behalf of the sub-region.
- Identify opportunities to jointly commission/fund services.
- Identify opportunities to develop joint funding bids and attract external funding
- Share evidence.
- Monitor issues.

6. GOVERNANCE ARRANGEMENTS

6.1 The Board would be co-chaired by the appropriate portfolio holders across the Partnership (administered through an annual rotation of Chair) with in support a Healthy Living Executive Officer Group Chaired by the Deputy Chief Executive for Communities and current Chief Operating Officer for the Clinical Commissioning Group (to be replaced by the equivalent once the Integrated Care Board is fully established) with the Deputy Chairperson being the Assistant Director for Well-Being and Community Leadership for the South and East Lincolnshire Councils Partnership.

6.2 The Board would be administered by the South & East Lincolnshire Councils Partnership. Since the Partnership was formed, the South & East Lincolnshire Councils Partnership Councils have been able to rationalise officer meeting attendance, which creates the capacity to support the formation of this Board.

6.3 The Board will meet every quarter with the agenda based on their remit. An officer group (Healthy Living Executive Officer Group) consisting of senior representatives of key agencies will meet between meetings of the Board to facilitate and support the work of the HLB.

6.4 Updates on the activity of the Board would be provided to Members on a regular basis.

- Council – Councillors would receive informal briefings on topics of note/interest, with formal reporting on the work of the HLB being included within the twice-yearly performance reports to Councils and other formal reports to Executive/Cabinet and Scrutiny as appropriate.

- Partnership Stakeholder Group – as a minimum, the Councils Stakeholder Group would receive updates at its six weekly meetings.

6.5 Whilst the Board remains a non-decision-making body should there be projects that require board approval, all members of the Board will have voting rights. Delegated authority is requested, as part of this report, for the Deputy Chief Executive of Communities to finalise with the Healthy Living Board a Healthy Living Action Plan and a programme for the sub-regions leisure and culture offer.

7 Developing the Work Programme for the South and East Lincolnshire Healthy Living Board

7.1 The creation of the Board as described in this report will enable the three district councils to crystalize with Partners (in the form of an action plan) a collective sub-regional response to the health concerns of local communities who live in South and East Lincolnshire. It is proposed that the new Board will draw out the issues from the health data for the sub-region and also an emerging Lincolnshire Districts Health and Well Being Strategy focusing on what can be achieved locally whilst recognising and calling for activity at other levels of governance and responsibility.

7.2 It is proposed that work to develop the action plan will take place over the summer and will be presented to the three Councils Executives/Cabinet during the autumn of 2022. Any decisions for funding for key actions within the action plan will be taken to Executive/Cabinet and Council as appropriate.

8. Recognising the Role of A Sub-Regional Leisure and Culture Offer Across South and East Lincolnshire

8.1 The connection between health, leisure and culture is well recognised. It is for these reasons that a district council model operating at scale can make a tremendous impact on the health of local communities. With 9 leisure and sporting facilities, 85 parks and play areas, 2 museums and theatres and many other cultural, leisure and heritage assets it is clear that sub-regional co-ordination of what is on offer in South and East Lincolnshire would be of great benefit to local communities.

8.2 To the above end it is an ambition of the South and East Lincolnshire Council Partnership to develop a sub-regional leisure and culture offer. It is proposed that this is developed by looking again at the data for health and well-being and how that can be utilised alongside other information regarding current assets and activity that can then be informed and further developed through community insight work including engagement with Partners/key stakeholders.

8.3 Recognising the synergy that leisure and culture has with Health and Well-Being it is proposed that work to develop a leisure and culture offer for the sub-region is developed through work within the proposed Healthy Living Board, engaging with the relevant Council portfolio holders for leisure and culture as required. Where leisure and culture is a focus of agendas for the HLB the relevant Council portfolio holders will be engaged to ensure their views and presence at meetings is supported.

8.4 It is proposed that work to develop the leisure and culture offer for the sub-region will take place over the summer and will be presented to the three Councils Executives/Cabinet during the autumn of 2022. Any decisions for funding for key actions within the action plan will be taken to Executive/Cabinet and Council as appropriate.

9. CONCLUSION

The approach set out in this report provides a positive platform for the South & East Lincolnshire Councils Partnership and Strategic Partners to come together more formally to align actions and resources with the objective of improved health outcomes for communities whilst supporting the co-ordination of a leisure and culture offer for the sub-region.

EXPECTED BENEFITS TO THE PARTNERSHIP

The formation of the Board in the way described in this report will provide a mechanism to further the Partnership's ambitions for the sub-region whilst addressing health inequalities and deprivation and maximising the opportunity for delivering a leisure and culture offer across South and East Lincolnshire. By bringing Strategic Partners together in a formal setting, it provides the ability for collective discussion on important issues and alignment of actions and resources.

IMPLICATIONS

SOUTH & EAST LINCOLNSHIRE COUNCILS PARTNERSHIP

As set out in 'Expected Benefits to the Partnership'.

CORPORATE PRIORITIES

The formation of the Board will provide a mechanism to support the delivery of outcomes sought in each Council's Corporate Strategy by enabling the delivery of co-ordinated action by a range of organisations on health challenges across the sub-region.

STAFFING

The Board will need to be resourced by the Partnership's workforce.

CONSTITUTIONAL AND LEGAL IMPLICATIONS

The establishment of a Healthy Living Board in the way described within this report and adoption of the terms of reference will formulate a non-key executive decision.

DATA PROTECTION

All population health data that will formulate the key priority areas for the sub-region will be publicly available.

FINANCIAL

Whilst there is not a specific budget allocated to the Health Living Board, any decisions required for funding from key actions within the proposed developed action plan and leisure and culture offer for the sub-region will be taken to Executive/Cabinet and Council as appropriate.

RISK MANAGEMENT

Risk	Mitigation
Partners decide not to engage with the Board.	Early engagement with Strategic Partners.
Interest in attending the Board reduces over time.	Continued engagement between Board members and creation of an agenda that directly benefits each organisation's individual outcomes, as well as the collective outcomes.

STAKEHOLDER / CONSULTATION / TIMESCALES

Discussions with Partners will be important in establishing the new model for the sub-region. An Officer Group of Council and Partner agencies has already met in support of developing the arrangements discussed in this report. Further discussions will take place with Partners and Members. The process of discussion and feedback will be important in shaping the mechanics and further finer detail of how the Board will operate.

REPUTATION

The Board would have a positive impact on the reputation of the Councils operating within the South and East Lincolnshire Councils Partnership, and the sub-region in recognition that there is a mechanism in place to help drive improved outcomes for our communities.

CONTRACTS

Whilst there is no direct impact on contracts from this report, there may over time be the joint commissioning of work between Partners.

CRIME AND DISORDER

The formation of the Board will include Partners seeking to address community safety as part of the wider determinants of health will have a positive impact on the sub-region.

EQUALITY AND DIVERSITY/ HUMAN RIGHTS/ SAFEGUARDING

The terms of reference for the Board ensures that equality and diversity, Human Rights and safeguarding are all considered appropriately.

HEALTH AND WELL BEING

The formation of Board in the way described within this report will have a positive impact on the sub-regions health and wellbeing by addressing health inequalities through a Partnership approach that works with Strategic Partners/key stakeholders across South and East Lincolnshire.

CLIMATE CHANGE AND ENVIRONMENTAL IMPLICATIONS

The formation of Board will include Partners seeking to take positive action on climate change and protecting the environment as part of the wider determinants of health.

ACRONYMS

- **HLB:** Healthy Living Board
- **HLE:** Healthy Life Expectancy
- **ICB:** Integrated Care Board
- **ICP:** Integrated Care Partnership
- **ICS:** Integrated Care System

APPENDICES	
Appendices are listed below and attached to the back of the report: -	
Appendix A	<i>South and East Lincolnshire Health Living Board Terms of Reference</i>

BACKGROUND PAPERS	
Background papers used in the production of this report are listed below: -	
Document title	Where the document can be viewed
SELCP Business Case	As part of 2021 Council report when the Partnership was approved.
South and East Lincolnshire Councils Partnership Performance Framework	Full Council report 12 th May 2022.

CHRONOLOGICAL HISTORY OF THIS REPORT	
Name of body	Date

REPORT APPROVAL	
Report author:	Emily Spicer – AD Wellbeing and Community Leadership
Signed off by:	John Leach – DCX Communities

Approved for publication:

John Leach