

**APPENDIX 1 TO REPORT NO. 9 FOR INFORMATION TO THE EXECUTIVE - 30TH
AUGUST 2007**

REPORT TO THE EXECUTIVE

Date of Meeting	18 January 2007			
Title of Report	Council Involvement in Health Issues			
Portfolio	Ross Henning & Dianne Moore			
Link to Corporate Priorities	Healthy Lifestyles: To provide leisure opportunities and facilities for everyone to encourage healthy lifestyles and Partnership Working			
Key Decision	No			
Executive Workplan Ref	B318			
Public Report	Yes			
<p>Summary of Report</p> <p>The report reflects upon the current level of Council involvement in health issues that impact on the lives of the north Wiltshire community. It examines the Council's engagement in health-related consultation and its responsibilities in respect to health issues linked to its employees, as well as the Local Area Agreement.</p> <p>In order to rectify the current disjointed approach, the report recommends that the Council undertakes not only a thorough review of how it engages in the health agenda, but also in its capacity to deliver actions, most especially those which fall within Healthier Wiltshire and the proposed Local Area Agreement.</p>				
<p>Officer Recommendations</p> <ol style="list-style-type: none"> That Executive requests the Overview and Scrutiny Committee to undertake research to explore ways in which the Council could become better involved in the health agenda and subsequently make recommendations to the Executive in respect to the Council's future level of engagement in health issues. That Executive consider a bid of £4,000 as part of the 2007/08 growth bids process and an officer resource to be incorporated into the re-organisational proposals, to ensure that the Council can fulfil its obligations under Healthier Wiltshire. 				
Other than those implications agreed with the relevant Officers and referred to below, there are no other implications associated with this report.				
Financial Implications	Legal Implications	Community & Environmental Implications	Human Resources Implications	Equality & Diversity Implications
Yes	None	Yes	Yes	Yes
Contact Officer	Miranda Gilmour: principal Community Partnership Officer: Tel: 01249 706380 email: mgilmour@northwilts.gov.uk			

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1. Introduction

- 1.1. The Council has an opportunity to engage and contribute towards the implementation of a range of health agendas, be they consultative or action orientated. Currently the level of engagement is ad hoc and lacks strategic direction.
- 1.2. This report seeks to remind Members of the Councils' current commitments to address health issues and their need to consider how best this may be achieved.
- 1.3. The recent Local Government White Paper, 'Stronger and prosperous communities' (Volume 2B), proposes building on the 2006 Health White Paper ('our health, our care, our say') in respect to improving local partnership working with the health sector and other partners. It suggests there should be more visible local leadership on health and well-being, particularly on public health issues such as childhood obesity, smoking and health inequalities

2. Options and Options Appraisal

- 2.1. **Option One:** to request the Overview and Scrutiny Committee to undertake research to explore ways in which the Council could become better involved in the health agenda and subsequently make recommendations to the Executive in respect to the Council's future level of engagement in health issues.
 - 2.1.1. The Council is a signatory to, 'Leading by Example' which requires partners to help achieve, 'Healthier Wiltshire' targets.
 - 2.1.2. Furthermore, the Council is currently considering a commitment to address health issues that fall within the Local Area Agreement (LAA). As a future signatory to the Wiltshire Strategy, the Council will have an obligation to contribute towards a range of health related targets. If the Council is minded to accept the proposals as set out in the health element of the LAA, it is likely that it needs to review the resources which will be required to do this effectively.
 - 2.1.3. Undertaking a comprehensive review of the Council's engagement in and responsiveness to health matters will enable the Council to identify a strategic approach to health matters and place it in a better position should it decide to sign up to the health element of the LAA.
 - 2.1.4. If cuts are made to the budget in 2007/08 there are likely to be insufficient funds to ensure that the Council can fulfil its health-related commitments under Healthier Wiltshire. This situation would be further exacerbated if Members decide to commit themselves to the health element of the LAA.
- 2.2. **Option Two:** to note the current situation but opt for no change.
 - 2.2.1. To opt for no change is likely to result in the Council's failure to meet its partnership obligations under the 'Healthier Wiltshire' programme and would leave the Council unprepared should it decide to sign up the LAA later in 2007. Such a decision would perpetuate a disjointed and ad hoc approach to addressing health issues and would have a negative impact on the community of north Wiltshire.

3. Council Corporate Priorities and Responsibilities

- 3.1. The issues discussed within this report relate to the Council's Corporate Priorities of Partnership Working and Healthy Lifestyles.

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- 3.2. Under Partnership Working, the Council has emphasised the need to “work in support of developing and delivery of the Wiltshire Local Area Agreement once agreed in March 2007”.
- 3.3. Under the commitment to support Healthy Lifestyles the Council has committed itself (amongst other things) to:
- ✓ Raise awareness of the need for healthy lifestyles for all ages
 - ✓ Increase participation within sport and physical activity – especially involving the disadvantaged and disengaged
 - ✓ Seek opportunities for providing added value into existing mechanisms and workplace structures to improve the health and wellbeing of the population.
- 3.4. The Council chose to address this area of work to link with the Governments’ priorities to improve health, especially childhood obesity and increasing participation in physical activity. It also recognised that the five Community Area Plans, the North Wiltshire Local Strategic Partnership and the Wiltshire Strategic Board all highlight Healthy Lifestyles as a local priority.
- 3.5. In addition the Council has a responsibility towards its employees under a range of statutory employment and health and safety regulations as well as through specific policies of the Council.

4. History of Addressing Health Issues

- 4.1. Following the publication of the White Paper ‘In Touch with the People’ (1998) regarding modernising local government, in April 1999 the Council adopted a Cabinet and Leader model under new democratic arrangements. With this change, the topic-led Committees disappeared and with them went the focus on health and National Health Service (NHS) related issues.
- 4.2. With this move, coupled with changing priorities of the Council, there was a reduction in officer time allocated to health related issues and health service and social care issues no longer featured in Lead Member portfolios.

5. Current Council Involvement in Health Matters

- 5.1. The Local Area Agreement (LAA) & ‘Healthier Wiltshire’
- 5.1.1. The County Community Strategy has linked outcomes to the proposed Local Area Agreement (LAA). It is the Healthy Communities LAA block which identifies a range of health outcomes which address the need to ‘Improve Health and Reduce Inequalities’.
- 5.1.2. In signing up to the Wiltshire Strategic Board (WiSB) Community Strategy, the Council needs to recognise its responsibilities to improve health and reduce inequalities. The Council has committed to work towards making Wiltshire the Healthiest County in England in which to live by 2014. As a signatory to the WiSB Strategy the Council has a responsibility to contribute towards the fulfilment of ‘Healthier Wiltshire’ targets.
- 5.1.3. Within the Health Block there are a number of sub-outcomes, namely:
- ✓ Reduce health inequalities in and between communities, including schools
 - ✓ Reduce levels of binge drinking and drinking in excess of recommended Government targets
 - ✓ Halt rising trend of obesity (increase physical activity and improve diet)
 - ✓ Reduce incidence of smoking

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- 5.1.4. In October 2005 the Council signed up to, 'Leading by Example' at the annual WiSB Conference. This committed the Council to take the lead in improving the health and skills of their employees and reducing the amount of waste they produce. The aspiration being that by leading by example this would encourage businesses and other organisations to follow suit. The Healthier Wiltshire element of 'Leading by Example' sets out, "to improve the health and well-being of people in Wiltshire by reducing the number of employees who smoke and by improving diet and levels of exercise".
- 5.1.5. Key responsibilities for the District Council under, 'Leading by Example' and 'Healthier Wiltshire' are the implementation and delivery of the 'Exemplar Employee' programme. This will require policy development in the areas of alcohol, smoking, exercise and healthy eating, plus supportive programmes to encourage behaviour change, amongst its employees. This activity has the potential to impact positively on the Council's workforce, including a positive impact on absenteeism and application in the workplace.
- 5.1.6. An organisational health budget of £7,000 was moved in October 2005 from Community and Environment and re-allocated to Human Resources and Payroll following the demise of the LIFE (Life Improvement for Employees) programme and the associated officer resources. This was done anticipating that the Human Resources and Payroll Team would be able to link their employee policy work to the 'Healthier Wiltshire' programme, although because of workloads this has generally not been possible.
- 5.1.7. Currently the Council is undertaking programmes to increase physical activity levels, through the Wiltshire Area Sports Partnership (WASP). This work is carried out by the Council's Sports Development Officer. Support of playgrounds and open spaces is undertaken centrally via the Assets, Design and Regeneration Team, but also frequently through Area Committee funding, linked to the Community Area Plans and the enthusiasm of the local community. Work carried this year to revise the Council's Smoking Policy (that will be introduced on 1st April 2007), was undertaken by a Strategic Manager. The Human Resource and Payroll Team are planning to undertake a stress audit in the near future, which will link to the Council's Health & Safety Policy.
- 5.1.8. Officer support is provided by a Strategic Manager and an officer from the Community Partnerships Team who deal with strategic issues associated with the development of the LAA Health Block and Healthier Wiltshire.
- 5.2. Council Engagement in Health Debate
- 5.2.1. To date it has become increasingly difficult to engage Members in health debates. These range from local consultation about the future of community hospitals and the services they provide to local people, to Government Green/White Papers such as 'Choosing Health, making healthy choices easier' (DOH 2005).
- 5.2.2. On occasions representatives from the Wiltshire Primary Care Trust (PCT) have attended full Council. While this presents an opportunity for all Councillors to receive a presentation, due to the nature of this body, the environment is not conducive to debate. Full Council does, however, provide an appropriate arena to debate the views of Members, arising from other Committees of the Council.
- 5.2.3. Executive has the potential to provide a response on behalf of the Council to health issues, be they of a consultative nature or single issue, although currently this does

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not take place. This may be partly because there is no Portfolio Member with specific responsibility for this work.

5.2.4. The Council's Overview and Scrutiny Committee could be asked to engage with the health agenda, at least where the Council is invited to respond to public consultation. Outcomes from this Committee could then be referred to full Council for approval.

5.2.5. Should Members wish to embrace their Community Leadership role more fully, involvement in health issues could be addressed at Area Committees, perhaps in conjunction with the Community Area Partnerships. This approach would help to further foster the relationship between Area Committees and Community Planning Partnerships and ensure a local responsiveness in relation to Community Plans.

5.2.6. Officer support from the Community Partnership Team is provided to encourage Member engagement.

5.3. Health Scrutiny

5.3.1. In April 2005 a single Health Overview and Scrutiny Committee was established by Wiltshire County Council, to which one representative from each District Council's Overview and Scrutiny Committee was invited to sit. At present it is not obvious that this Councillor obtains any steer from the Council or its Overview and Scrutiny Committee as to their opinions about matters under investigation, neither is there any formal mechanism to share outcomes with fellow members of the Council.

5.3.2. Officer support from the Community Partnership Team is provided to support the health scrutiny Member.

5.4. Member Roles & Responsibilities

5.4.1. At present a range of health issues, (including NHS impact on the community and public health issues), does not sit comfortably with any one of the current Portfolio holders.

5.4.2. The Council appoints a Member who acts as an observer at PCT Board Meetings, but there is no formal mechanism by which he reports issues or concern back to Members for debate.

5.4.3. The Council appoints a Member to the County Health Overview and Scrutiny Committee, although this arrangement could more closely be associated with a Councillor representing the Council on an outside body.

5.4.4. Every Councillor is encouraged in their role as a Community Leader, which creates a unique opportunity for them to embrace a holistic approach to the needs of the community they serve and extends beyond the immediate priorities of the Council.

6. Financial Implications

6.1. A budget of £7,000 in 2006/07 was allocated to the Human Resource and Payroll Team to address those health issues related to employees. It would be reasonable to suggest that matters identified under the LAA responsibilities which fall under 'Healthier Wiltshire' should be awarded a priority and addressed under this budget.

6.2. This budget has recently been identified as an area for savings with a proposal to reduce the budget to £3,000 from 2007/08 onwards.

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- 6.3. While the proposal to reduce the budget is associated with it not having been spent in recent years, if the Council intends to meet its commitments under the LAA a budget as well as officer resources will have to be found in 2007/8 and beyond. It is strongly suggested that no cuts be made to this budget.
- 6.4. The decision to spend should be taken as part of the budget process, so that the commitment is considered in relation to other bids for scarce resources. The Executive will make its recommendation on the 2007-08 budget on February 1st 2007.

7. Community and Environmental Implications

- 7.1. Any decisions related to this report will have an impact, directly or indirectly on local people. Health is an issue that impacts on everyone, whether it is related to service provision or individual health and wellbeing.
- 7.2. The recent Local Government White Paper, 'Stronger and prosperous communities' proposes that there should be improvements in local partnership working with the health sector and other partners, suggesting that there should be more visible local leadership on health and well-being.

8. Human Resource Implications

- 8.1. It might be appropriate for a nominated lead officer to be appointed to proactively coordinate all elements of health related work within the Council, rather than the current situation where issues are picked up in a rather ad hoc manner and as resources allow.
- 8.2. Members will need to consider staff resources to ensure that any budget is effectively utilised.

9. Equality and Diversity Implications

- 9.1. Two Equality Impact Assessments have been undertaken and published on the Council's web site which would have an impact on this work:
- ✓ Development of the Primary Sport Programme, club development, alternative sporting opportunities, Anti-social behaviour initiatives, Health initiatives.
 - ✓ Community Planning, Community Area Awards, Partnership Working
- 9.2. The assessments concluded that there was no adverse impact on any particular sector of the community in terms of the seven strands of equality and diversity.

10. Risk Analysis

- 10.1. There is significant risk that unless Members adopt a systematic approach to addressing health issues, to include the allocation of staff resources, and an appropriate budget, the Council could be at risk of being unable to fulfil their responsibilities, most especially those currently related to 'Healthier Wiltshire' plus those which fall within the proposed LAA.
- 10.2. There is a risk associated with allocation of additional budget in terms of officer resource at a time when savings are being sought.

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Appendices:	None
Background Documents Used in the Preparation of this Report:	<ul style="list-style-type: none"> • Local Government White Paper – Stronger and prosperous communities

Previous Decisions Connected with this Report

Report	Committee & Date	Minute Reference
<ul style="list-style-type: none"> • Please list any previous reports or state None 	None	None