Shropshire Council

**Cabinet
21st February 2024**

Item

Public

Healthy People

Healthy Economy

Healthy Environment

Healthy Organisation

Response to report of the Health Overview and Scrutiny Committee- Rural Proofing in Health and Care

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Cabinet Member (Portfolio Holder):	Cecilia Motley		

1.   Synopsis

To provide a response from Shropshire Council to the findings and recommendations of the Rural Proofing in Health and Care Task and Finish Group following their investigation looking at the options to effectively 'rural proof' the amendment or introduction of strategies, plans, policies and service design and provision in health and care in Shropshire.

2.   Executive Summary

2.1.   The report of the Health Overview and Scrutiny Committee which adopted the report of the Rural Proofing in Health and Care Task and Finish Group, set out key findings, conclusions and recommendations of their work considering delivering health and care services to rural communities.

2.2.   Cabinet members resolved to bring a report to the next meeting of Cabinet to respond to the recommendations contained within the Task and Finish Group's report. This report sets out that response and the prioritisation of the recommendations within the report.

3.   Recommendations

3.1.   Cabinet members are asked to endorse the next steps as out lined in this report.

Report

4.   Financial Implications

4.1.   Whilst there are no direct financial implications from this report, should the Cabinet wish to adopt any of these recommendations then appropriate financial advice on the costs involved should be sought.

5.   Climate Change Appraisal

5.1.   Work completed by the Task and Finish Group has identified the following points related to their work which could have benefits for climate change and the environment:

- By undertaking an end-to-end evaluation of the travel and transport infrastructure which supports the Shropshire health and care system the Groups recommendation has the potential to benefit the climate by reducing the number of individual car journeys made by residents and so reducing carbon emissions and improving air quality.

6.   Background

6.1.   Members of the Health and Adult Social Care Overview and Scrutiny Committee (now Health Overview and Scrutiny Committee) had highlighted concerns about rurality and access to health and care services through their work. This Task and Finish Group was commissioned to draw together the key points and observations that have arisen through the work of the committee during 2022/2023, to review the latest local and national evidence on rural proofing, hear from local system providers and take the opportunity to learn from other areas of the country.

7.   Report Recommendations

Shropshire Council have prioritised actions and recommendations as outlined below.

Initial short-term (6-12 months) delivery actions to be supported by Shropshire Council:

- The group recommended that rurality and the accessibility factors that are associated with it becomes a key consideration for Shropshire's health and care system (including Shropshire Council) when adapting or introducing a new service or policy and recommend the use of the Rural Proofing for Health Toolkit to achieve this.
  Shropshire Council accept the recommendation to adopt the Rural Proofing for Health Toolkit written by Rural England CIC, with input from the Nuffield Trust. It was a joint commission with the National Centre for Rural Health & Care. It will begin to adopt this with immediate effect.
- That an evaluation be undertaken by Shropshire Council to understand the impact of digitalisation on protected and vulnerable demographics (including those living rurally.) Understanding more about the current and future needs in different communities and investigating alternative delivery models to provide the infrastructure, access to equipment and support to enable all communities to benefit from the advantages which digital services can provide.
  Shropshire Council accepts this recommendation but feels it would be most appropriate that this should be taken forward in partnership through

the new digital inclusion network. To this end it has been requested that the joint chairs of the network consider the inclusion of this in their action plan and meetings.

- That an evaluation be undertaken by Shropshire Council in their role as commissioner and Place co-ordinator to understand how the Council's intelligence and data gathering function can contribute to discussions and research on how to identify small pockets of deprivation in rural communities. Testing how ambitious the strategic plans are about strengthening the power of community, leading the way by using robust data to identify the challenges facing different areas, building local capacity, embracing coproduction and community delivery, and devolving power and resources to neighbourhoods.

  Through the JSNA process, Shropshire Council is committed to a more localised understanding of need and intelligence gathering. In addition, the Council will continue to work with research partners, including universities and other rural authorities, the Centre for Rural Studies, and regional partners, to explore opportunities to enhance research in this area further.

- Whilst this Group have focussed on rural proofing specifically in the health and care system their findings have shown that its impact is much wider ranging and relevant to all areas of the Council and the support provided to rural communities. The Group therefore recommends that the Shropshire Council 2020 Community and Rural Strategy be updated and implemented.

  The ICS are currently leading the development of a rural health strategy, this will build on the Councils 2020 Strategy and more recent evidence including the work of the task and finish group. The Council has committed through the ICB to support the development of the strategy and following completion of this work will review next steps.

- That the Rural Proofing for Health Toolkit be recommended for use to its partner local authorities and then this be expanded to Herefordshire, Monmouthshire and Powys as with evidenced cross border working through shared interests and the new Marches Forward Partnership, the Group recommends that the adoption of this Toolkit forms part of the Memorandum of Understanding by all the authorities which will contribute towards a shared understanding of the opportunities and challenges of delivering health and care services to rural communities.

  Shropshire Council have made and will support this being recommended to the Marches Forward Partnership.

The following actions will be considered during the medium term (12 months plus) as officer capacity and resources are available:

- That a permanent Mental health Commissioner role be appointed for Shropshire Council to provide system oversight and strategic leadership. The post has currently been filled on a fixed term basis in the interim

- That communication between Council officers, system partners and councillors be reviewed to ensure that the best use of councillor's knowledge of their communities and where there may be previously unidentified health needs. It is recommended that regular briefing updates are provided to councillors from Council officers and system partners so that Members are aware of developments in service delivery and can feed in their local knowledge to the work being developed, sharing new

developments and service offers with their communities especially supporting with facilitating communication with historically hard to reach groups.

- The Groups research has shown that local support from the voluntary sector does, and will continue to play, a vital role in supporting residents by providing access to health and care services in rural locations. However, as resources are required to do this; sufficient understanding of the needs of the voluntary organisations and planning time needs to be built into the system. The Group recommends that the Rural Proofing for Health Toolkit be completed alongside the impact assessment process, as in each section it includes prompts to consider the ask being made of the voluntary sector.

- That an agreed system approach to 'local' be defined to assist with having comparable data at a local rather than regional level. With Shropshire Council using its role as a public health authority and leader of the Health and Wellbeing Board to ensure that rural communities' travel time to services is an integral factor in the planning of services in the health and care sector.

- That the process and legal obligations for Equality, Social Inclusion and Health Impact Assessment (ESHIA) in terms of responding to impacts identified through the ESHIA be clarified for Officers and Members and until then that this matter be logged on the Shropshire Council strategic risk register.