

HEALTH AND WELLBEING BOARD

3 NOVEMBER 2016

HEALTH AND WELLBEING BOARD DEVELOPMENT SESSION OUTPUTS

Report from: Dr Andrew Burnett, Interim Director of Public Health
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Summary

This paper summarises the key outputs from a development workshop for the health and wellbeing board held in September.

It is important to ensure that the Board works effectively in order to support the developing sustainability and transformation plan process for Kent and Medway so that local people can get more effective, high quality services within available resources that meet key needs.

Board members are asked to review and comment on the outputs from the development workshop and to suggest any further ways in which the workings of the Board can be strengthened to better enable local people to have improved health and reduced health inequalities.

Arising from this discussion, Council officers will review the Board's current terms of reference and propose any appropriate changes for consideration through the appropriate governance process.

1. Budget and Policy Framework

- 1.1. Health and wellbeing boards are forums where key leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities.

2. Background

- 2.1 The establishment of sustainability and transformation plans (STPs) across the country, including one for Kent and Medway, make it timely to review, within the existing legislative framework, how the Medway Health & Wellbeing Board works, and how it can best be used to support and enable the creation and delivery of a successful STP locally.
- 2.2 A developmental workshop was held on 19 September 2016 to review the operation of the Board. The key points raised are set out in the appendix.

3. Advice and analysis

3.1 The principal points raised at the workshop were that:

- The Board can be used as a driver for the radical changes we face, but we need a shared agenda for member organisations and must ensure that 'messages' reach the entire workforce effectively;
- The Board needs 'recalibrating' in terms of:
 - (i) Driving an STP-focused health and wellbeing strategy for Medway
 - (ii) Significantly supporting and enabling local delivery of STP proposals for transformational service change through both political and managerial routes.
 - (iii) Ensuring greater inclusivity of relevant local organisations to achieve this.
 - (iv) Promoting and enabling industrial scale prevention
 - (v) Promoting and enabling people to be sufficiently independent so that they actually need fewer services.
- The approach to the way board papers are both written and presented needs to be revised.
- The Terms of Reference may need to be revised, within the existing legislative framework.

4. Financial implications

4.1 No financial implications arise specifically from this report.

5. Legal implications

5.1 With effect from April 2013, Section 194 of the Health and Social Care Act 2012 required all upper tier local authorities to establish a Health and Wellbeing Board (HWB) as a Committee of the Council. Whilst the Health and Wellbeing Board is intended to be different from the traditional type of Council Committee, bringing together system leaders and taking a strategic view across the whole of the local health and care economy, the membership and governance arrangements for the HWB must meet statutory requirements including those set out in the Health and Social Care Act and 2012 and The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.

6. Recommendations

6.1 Board Members are asked to review and comment on the outputs from the development workshop and to suggest any further ways in which the workings of the board can be strengthened to better enable local people to have improved health and reduced health inequalities.

6.2 Arising from this discussion, Council officers will review the Board's current Terms of Reference and propose any appropriate changes for consideration through the appropriate governance process .

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Appendices

Appendix 1 - Medway Health & Wellbeing Board development workshop, 19 September 2016 – Key points raised

Appendix 2 – Health and Wellbeing Board - Current Terms of Reference

Background papers

None

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Medway Health and Wellbeing Board Development Workshop

19 September 2016

Key Points Raised

This is a summary of the key points arising from a pre-workshop questionnaire and in subsequent discussion at the Board's development workshop. Suggested actions are proposed.

Background: Health and wellbeing boards (H&WBBs) are forums where key leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities.¹

- Many Medway H&WBB members see the Board as a driver for change (but some strongly disagree with this):
 - Previously, a lack of a shared agenda between member organisations meant each had different priorities and this helped to create tensions;
 - Medway's H&WBB has the potential to do more where issues and services have 'joins' and members are coming together more now; and
 - H&WBB messages are not necessarily reaching the workforce (managers and front line) and this needs addressing.
- We face a radical change in the philosophy of health and social care services, not just another organisational change –
 - H&WBBs have a role in getting that message 'out there';
 - There is potential to bring in other organisations, such as the police, representation from the voluntary sector; and
 - It is vital to use untapped resources, such as politicians, to promote change to meet people's needs, enable local ownership, and to take things to the 'next stage'.
- Sustainability and Transformation Plans (STPs) provide a key opportunity to enable system-wide change and over a large area – what we do in Medway impacts on people and services in Kent and vice versa (needs and services cross organisational boundaries) –
 - STPs concern a variety of services for people in a particular place (such as across Kent and Medway) and not services provided within, or commissioned by, individual organisations; and
 - STPs can be an 'umbrella' covering a range of delivery plans for different local needs across different communities but are provided by different services that are related through the needs of individual patients/clients.
- Medway's H&WBB needs 'recalibrating' –
 - Maybe using the Kent & Medway STP to drive the next Medway health and well-being strategy (and vice versa); and
 - Agreeing our common purpose, including preventing patients/clients being 'bounced' from one organisation to another (that is, ensuring that

¹ Health & Social Care Act 2012 definition. See http://www.local.gov.uk/health/-/journal_content/56/10180/3510973/ARTICLE (accessed 27 September 2016)

patients/clients get services from the appropriate range of organisations in a better, joined-up way:

- We need to understand where we are failing to meet people's needs and how we can do so more successfully; and
 - We need to change services so that they are centred on patients/clients rather than organisations and buildings (that is, take services to patients/clients rather than expect them to navigate between departments within one organisation and between departments in different organisations).
- Medway's H&WBB can act as an interface between care organisations in Medway (and beyond) to help deliver the Kent and Medway STP, ensuring that commissioning and service provision really is transformed to enable sustainability.
 - It can also help to address meeting different needs in different local areas, ensuring a local perspective as part of a wider STP –
 - This includes broader services involvement, such as housing and education;
 - We can help ensure 'wrap-around' services to better meet people's complex needs and reduce tunnel vision of individual services, that is, we should focus more on total packages of health and social care provided between organisations and not just on discreet services from individual organisations; and
 - Such services can include better enabling people to help themselves – it is not just about providing services but helping people to be sufficiently independent so that they actually need fewer services (we and our service providers will need to go the extra mile to achieve this).

Develop joint deliverables for H&WBB constituent organisations so the must-dos are relevant to all –

- Some of these can help to operationalise the Kent & Medway STP; and
 - Others will enable implementation of non-STP priorities;
- We need to ensure that the right people are members/attendees of the H&WBB and that substitutes for members who cannot attend are (i) adequately briefed and (ii) empowered to make commitments on behalf of the absent member;
 - H&WBB agenda-setting needs to be –
 - More streamlined,
 - more focussed on STP recommendations and actions requiring – through due process – local implementation, especially when two or more organisations must work together;
 - H&WBB papers should, in future, be –
 - co-authored by senior people in each of the organisations involved to foster co-ownership.
 - reflect all relevant aspects of the H&WBB's (revised) terms of reference,
 - include summaries at the front that are no longer than two pages, with appendices for additional detail if required.
 - presented with key points only (perhaps a maximum of four) to facilitate greater discussion on what is necessary to enable implementation and

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Health and Wellbeing Board - Current Terms of Reference**A. Operating principles**

In line with nationally agreed operating principles the Medway Health and Wellbeing Board (HWB) will seek to:

- (i) provide collective leadership to improve health and well-being across the local authority area, enable shared decision-making and ownership of decisions in an open and transparent way;
- (ii) achieve democratic legitimacy and accountability, and empower local people to take part in decision-making;
- (iii) address health inequalities by ensuring quality, consistency and comprehensive health and local government services are commissioned and delivered in the area; and
- (iv) identify key priorities for health and local government commissioning and develop clear plans for how commissioners can make best use of their combined resources to improve local health and well-being outcomes in the short, medium and long term.

B. Key functions

- (i) To prepare the Joint Strategic Needs Assessment (JSNA) which identifies the current and future health and wellbeing needs of the local population and may address needs around wider determinants of health.
- (ii) To prepare a Joint Health and Wellbeing Strategy for Medway to meet the needs identified in the JSNA.
- (iii) To prepare the Medway Pharmaceutical Needs Assessment.
- (iv) To encourage persons who arrange for the provision of any health or social care services in the area to work in an integrated manner for the purpose of advancing the health and wellbeing of the people in Medway.
- (v) To encourage persons who arrange for the provision of any health related services (ie services that may have an effect on the health of individuals but are not health or social care services) in Medway to work closely with the Board.
- (vi) To encourage persons who arrange for the provision of any health or social care services in Medway and those who arrange for the provision of any health-related services in its area to work closely together.
- (vii) To provide advice, assistance or other support appropriate for the purpose of encouraging the making of arrangements under section 75 of the National Health Service Act 2006 (ie arrangements under which NHS bodies and local authorities agree to exercise specified functions of each other).
- (viii) To keep NHS commissioning plans under review to ensure they are taking into account the JSNA and local HWB Strategy, referring back to the Clinical Commissioning Group (CCG) or the NHS Commissioning Board where they do not.

APPENDIX 2

(ix) To advise Medway Council's Cabinet of its views on whether the local authority is discharging its duty to have regard to the JSNA and Joint Health and Wellbeing Strategy in discharging its relevant functions.

(x) To involve users and the public in the work of the Board, as appropriate.

(xi) To play a formal role in the annual assessment of the Medway Clinical Commissioning Group.

(xii) To undertake any other functions assigned to Health and Wellbeing Boards in legislation.

Governance arrangements for the operation of the Medway Health and Wellbeing Board were agreed by Council on 25 April 2013.

(i) **Appointment of Chairman and Vice Chairman:** The Chairman and Vice Chairman of the Board will be appointed at the first meeting of the Board after each Annual Council meeting, discounting the Joint Meeting of all Committees on the evening of Annual Council. The Chairman will be appointed from among the councillors serving on the Board.

(ii) **Meetings:** The Board will meet a minimum of four times a year and be administratively supported by Medway Council's Democratic Services Team. Meetings will take place in public with provision for exclusion of the press and public where confidential or exempt information is likely to be disclosed.

(iii) **Sub-committees:** The Board may set up advisory sub-committees but any proposal to delegate the functions of the Board to a sub-committee or an officer (or from a sub-committee to an officer) insofar as this is permitted, shall be subject to agreement by the Council.

(iv) **Attendance:** The quorum for Board meetings will be a quarter of the membership and meetings may only proceed if at least one local authority member and one CCG representative are present. Substitutions are permitted with notification to the Democratic Services Officer ahead of the meeting.

(v) **Conduct of meetings:** Meetings will be conducted in accordance with the procedural rules applicable to Council meetings as appropriate.

(vi) **Voting:** All members of the Board will have the right to vote, subject to the law and procedures for registering and declaring interests which will require non-participation and withdrawal from meetings when conflicts of interest arise.

(vii) **Programming of business:** the Board will determine its own work programme and pre-agenda processes taking into account statutory requirements relating to notice of meetings and publication and availability of agenda papers and will use the templates and standards in place for reports to other Council committees.

(viii) **Communications and engagement:** the Board will develop a Communications and Engagement Strategy during 2013/14 which will set out how the Board will engage with stakeholders and the public and how communications on behalf of the Board will be managed.

APPENDIX 2

(ix) **Operational links:** the Board will work collaboratively with other partnership bodies including the Children's Trust, the Medway Safeguarding Children Board, the Adult Safeguarding Board and the Community Safety Partnership, taking into account the need for alignment between the Joint Health and Wellbeing Strategy and other key plans and strategies.

(x) **Overview and scrutiny:** the Board will be subject to overview and scrutiny and will respond to requests for information and representation at overview and scrutiny committees as appropriate.

(xi) **Review:** the terms of reference of the HWB and the governance arrangements will be kept under periodic review.