

Staffordshire Health & Wellbeing Board				
Report Title:	Assessment of Statutory Duties and Purpose			
Date:	7 March 2019			
Author:	Jon Topham			
<b>Board Sponsor:</b>	Cllr Alan White			
Report Type:	System Issues □ Prevention □ Statutory Duties ⊠			

#### Recommendation

a. The Board is asked to consider the report and the actions in paragraph 7.

### Background

 The Health and Care Act 2012 created Health and Wellbeing Boards as a statutory body with several statutory duties. This was described by the Kings Fund (2016) as follows:

Health and wellbeing boards are a formal committee of the local authority charged with promoting greater integration and partnership between bodies from the NHS, public health and local government. They have a statutory duty, with clinical commissioning groups (CCGs), to produce a joint strategic needs assessment and a joint health and wellbeing strategy for their local population.

The boards have very limited formal powers. They are constituted as a partnership forum rather than an executive decision-making body.

In most cases, health and wellbeing boards are chaired by a senior local authority elected member. The board must include a representative of each relevant CCG and local Healthwatch, as well as local authority representatives. The local authority has considerable discretion in appointing additional board members. Most have chosen not to invite providers to become formal members, though many engage with providers in other ways.

https://www.kingsfund.org.uk/publications/health-wellbeing-boards-explained

- 2. The Local Government Association (LGA) have produced four papers examining the effectiveness of HWBB
  - a. Great Expectations (2014)
  - b. Stick With It (2015)
  - c. The Force Begins to Awaken (2016)
  - d. The power of Place (2017)
- 3. The LGA identified some key factors in creating effective Health and Wellbeing Board (HWBB)
  - a. A focus on place
  - b. Committed leadership exerting influence
  - c. Collaborative plumbing to underpin the leadership of place and influence of Sustainability Transformation Partnership (STP).
  - d. A geography that works or the capacity to make the geography work



- e. A Director of Public Heath (DPH) that gets it and who can support place based leadership
- 4. What is clear is that most HWBB have struggled to assert a leadership role, although the more "successful" ones have focused in on a core function, primarily around the wider determinants of wellbeing.

# **Health and Wellbeing Board review**

- 5. At the December HWBB, a request was made to review the HWBB against its statutory duties. This request was made in the light of recent decisions to focus the Board on prevention through our new Joint Health and Wellbeing Strategy (JHWS), and an ongoing concern that the Board is largely a place where documents are passively signed off. There is a sense that we could make the Board a more proactive place that focuses on key agendas prevention (wider determinants) and place, for the wider partnership.
- 6. The following tables outline Statutory duties and purpose of the HWBB as articulated in the Terms of Reference, which were agreed in September 2018:



Prepare and publish a Joint Health and Wellbeing Strategy (JHWS) setting out how the needs identified in the JSNA will be prioritised and addressed.	JHWS adopted June 2018	The current strategy is a deliberately simplified strategy and was endorsed by extensive public consultation  The HWBB has not currently identified how it wishes to deliver the JHWS
Ensure effective public engagement and consultation in developing the JSNA and JHWS.	Healthwatch are members of the HWBB Meetings are public Some work to develop conversations with the public  JHWS was consulted on and received positively	The Board could put more priority on embedding public engagement and consultation, although this would require staff and resources. Public conversations around obesity and end of life planning have been led by the county council's Public Health and Communications and Marketing Teams
Promote the integration of health and social care services including to provide advice, assistance and other support in encouraging arrangements under section 75 of the NHS Act 2006.	Mainly Better Care Fund (BCF) oversight	Integration of health and social care includes Social Workers managed by NHS Community Trusts although there has been no discussion about this at the HWBB  There has been limited formal strategic direction given by the HWBB to encourage integration
Encourage providers to work closely with the Board and encourage those that provide health, health related or social care services in an area to work "closely together".	Providers have been included as members on the Terms of Reference, although we need to formally invite providers onto the Board.	Some thought as to how the HWBB involves provider organisations is required
Consider and report on whether CCG Commissioning Plans have taken proper account of the JHWS.	CCG commissioning plans and Social Care plans are the subject of a substantial agenda item every year.	The HWBB needs to consider how it makes this a more dynamic process



Board Purpose	How	Comment
Provide leadership for the	Chaired by Deputy Leader	The Board tends to be
health and care system in	of SCC and Chair of North	reactive and does not lead
Staffordshire.	Staffs CCG	the health and care system
		in Staffordshire. It is not
	The Board has	integrated into the broader
	representation from STP	partnership structures in
	Director	Staffordshire
	Director of Public Health /	
	Adult Social Care	Some Board members are
	Representation from	closely integrated into
	Staffordshire County	leadership of the Health
	Council (SCC) Deputy Chief	and Care system and the
	Exec	membership of the Board
	Chief Fire Officer or	could be facilitate a clearer
	representative	leadership role for the
	Chief Constable or	HWBB.
	representative	The CTD has a reserve
	The Torme of Deference	The STP has a programme
	The Terms of Reference	structure but there is still
	also allow for provider representation on the	work to do to bring agendas and actions together with
	Board. This has not been	the HWBB.
	actioned yet	the HWBB.
	Elected members SCC	
	Elected Members (two	
	Districts)	
	District Chief Exec	
	Healthwatch	
	Voluntary, community and	
	social enterprise (VCSE)	
Work alongside the STP to	STP is represented on the	There is still confusion
maintain an oversight of	HWBB and reports in	about the respective roles
outcomes, quality of		of HWBB and STP. The
services and use of		recent strategy sought to
resources across the health		give the HWBB a
and care system.		leadership role for
		prevention, although work
		needs to be done to make
		this happen.
		Healthwatch provide some
		intelligence about the
		quality of the service and
		formal reports (eg CQC) are
		tabled at HWBB.
		Some oversight of BCF
		funding is provided by the
		Board although this is
		largely passive and left to
		the BCF/Joint



Board Purpose	How	Comment
		Commissioning Board to manage.
Work with the STP to develop, review and ensure implementation of the Sustainability and Transformation Plan (STP) and Joint Health and Wellbeing Strategy (JHWS).	Health and Wellbeing Strategy has recently been revisited.  STP plan discussed regularly at HWBB.	There is currently no formal review and no emphasis on implementation of STP or JHWS
Identify opportunities and oversee delivery of major preventative transformation projects across the health and care system, and ensure wide partnership engagement in these.	The JHWS has a strong focus on prevention, focused on key demand issues across the lifecourse, notably vulnerable young people and ageing population.  The overall focus, is <i>To help people stay as well as the can for longer</i> , the emphasis is on extending healthy life expectancy  Key areas of focus are identified as:  1. Information (IAG) 2. Conversations (public debates) 3. Decisions (HIAP and healthy public policy) 4. Communities (asset building)	The strategy is not yet broadly embedded
Ensure that appropriate governance arrangements and sufficient resources are in place for the above.	JHWS was adopted June 2018 Terms of Reference adopted September 2018	<ul> <li>Tasks for 2019</li> <li>Agree role and place for HWBB in broader partnership</li> <li>Agree focus for a work programme</li> </ul>
Ratification and Strategic lead for the Families Strategic Partnership	Family Strategic Partnership Board (FSPB) provides regular updates on progress of FSP programme, next one scheduled for June 2019	FSPB papers are tabled at the HWBB, comments tend to be supportive rather than challenging
Identify opportunities for and oversee joint commissioning between the Council and NHS,	BCF is covered in most HWBB agendas	HWBB could be more involved in providing oversight of BCF



Board Purpose	How	Comment
especially with regard to BCF.		Should other joint commissioning arrangements be ratified by HWBB?
Ensure mutual understanding of the major issues facing constituent organisations, and ensure that respective organisational change programmes are consistent with the vision and objectives of the Board as set out in the STP and JHWS.	JHWS was developed in response to the key demands faced by the health and care system. They are:  Reduced funding Increasing demand - vulnerable children Increasing demand - ageing population High (unrealistic) public expectations	JHWS ambitions are in line with most organisational change programmes, although we have not challenged the health and care system to show leadership.
Ensure consistent and effective communication with the public about the STP, JHWS and major transformations to health and care services.	HWBB is held in public  Work on public conversations was initiated 2017/2018	HWBB should consider a new programme of conversations and how these should be resourced.  The HWBB should also consider its role in communicating with the public about upcoming change and transformation in the health and care system
Make recommendations to NHS England (NHSE) and NHS Improvements (NHSI) in relation to transformations that require regulator action.	NHSE are invited to HWBB	There is limited formal dialogue between the Board and NHSE
Carry out the statutory functions of the Board as listed in paragraph 2.	See item 2	

# **Summary and recommendations**

- 7. This assessment suggests there is still quite a lot of work to do to make the HWBB meaningful and successful. Key areas of action are:
  - a. The HWBB should agree key actions areas that will help us deliver the JHWS what are we going to focus on?
  - b. The HWBB should broker wider discussions about its place in the Staffordshire partnership structure - where should HWBB be positioned for maximum effectiveness?
  - c. The HWBB should self assess against the purpose and statutory duties annually, this process should include responses from members of the Board why are we



here?

- d. The HWBB should extend this assessment to seek the views of Board members and of wider lined stakeholder groups and organisations who are our stakeholders and what do they think?
- e. The HWBB should draw up an action plan to ensure progress against the findings of this assessment how do we know if we are being effective?

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### **List of Background Papers:**

#### Health & Social Care Act 2012

http://www.legislation.gov.uk/ukpga/2012/7/part/5/chapter/2/crossheading/health-and-wellbeing-boards-establishment/enacted

### The Power of Place

https://www.local.gov.uk/sites/default/files/documents/The%20power%20of%20place%20health%20and%20wellbeing%20boards%20in%202017.pdf

# Kings Fund

https://www.kingsfund.org.uk/publications/health-wellbeing-boards-explained