Topic:	Methodology for assessing HWB commissioning strategies and intentions
Date:	21 <sup>st</sup> May 2015
Board Member:	Aliko Ahmed
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Report Type	For Consideration

## 1 Purpose of the Report

- 1.1 In late 2014, the Staffordshire Health and Wellbeing board accepted the proposal that it can be supported to manage its cycle of business by the establishment of a HWB Intelligence Group. This group is now up and running and is developing its programme of business for 2015/16.
- 1.2 This paper outlines the proposed approach by the HWB Intelligence Group on how it exercises the responsibility to ensure alignment of strategies to the Living Well in Staffordshire strategy of the Board. This approach is intended to undergo a trial by evaluating a single strategy and modified as appropriate. This will enable the board to better deliver improved outcomes for the people of Staffordshire and facilitate the integration of different parts of the Staffordshire health and well-being economy.
- 1.3 The Board is asked to consider this report and recommend that the approach is trialled.

### 2 Methodology for assessing HWB commissioning strategies and intentions

### 2.1 What strategies are in scope?

The scope may evolve and change over time. In the first instance the intelligence hub will support the board with its obligations to review the commissioning intentions and strategies of the Clinical Commissioning Groups; secondly the hub will consider integrated commissioning strategies. This would therefore include the following strategies (and their allied commissioning intentions):

- All Age Disability
- Mental health
- Children
- Older People (and its former prevention counter-part of Help to Live at Home)
- Carers
- Drugs and Alcohol.

## 2.2 The Proposed Assessment team

A subset of the Intelligence Group (with co-opted members) will be formed. They will act as a core pool of people with developing experience to evaluate the strategies and commissioning intentions. As a minimum this pool should include colleagues from:

- CCG's
- The county council
- The district/borough councils
- Health Watch
- The Insight and Intelligence team in SCC.

Additional expertise will be brought into the evaluations as necessary.

## 2.3 The Proposed Process

A business cycle will be developed for the evaluation of strategies to be agreed taking into account the resource requirements of the process, the potential systems value of the review and the needs of partner organisations. Then:

- 1. The PMO will ask for the relevant strategies to be forwarded to the evaluation team in a timely fashion
- 2. The individual evaluation team members will evaluate the strategies according to the agreed template (appendix 1)
- 3. The evaluation team will then meet to moderate their ratings and determine a single perspective on the strategy according to the evaluation template
- 4. A member of the evaluation team will feedback to the lead officer of the strategy on the findings
- 5. The pool will make recommendations on current strategy/future strategy to align to and deliver in accordance with the *Living Well in Staffordshire* strategy
- 6. The evaluation team will submit a report to HWB Intelligence Hub for quality assurance
- 7. The Board will receive a summary report.

#### 3 Recommendations:

3.1 The Board is asked to consider this report and recommend that the approach is trialled.

# Appendix 1

# **Draft Proposed Evaluation Tool**

	Comments	RAG rating
1) Use of evidence		
Prompts:		
<ul> <li>Does the strategy use the evidence made available through the JSNA process?</li> <li>Has it considered and acted upon the views of local people?</li> <li>Has it considered the views of local practitioners / providers?</li> <li>Does the strategy make use of specialist needs assessments conducted for key target groups where relevant?</li> <li>Does the strategy make use of relevant national learning, benchmarking information and the experience of others with similar challenges?</li> <li>Does the strategy make use of the knowledge, guidance and evidence-base for relevant interventions?</li> <li>Is there evidence of partnership working in the development of the strategy?</li> <li>Does the strategy reflect how individuals / local communities are being engaged collaboratively to find their own solutions to improve local health and wellbeing outcomes?</li> <li>How well are the contributions of the third sector and community structures reflected in the strategy?</li> </ul>		

	Comments	RAG rating
2) Alignment to Living Well strategy		
Prompts:		
<ul> <li>Does the strategy make reference to the Living Well strategy?</li> <li>Does the strategy align to the principles and enablers set out in the Living Well strategy?</li> <li>Does the strategy set out how it will deliver against the health and wellbeing priorities identified in the JSNA / joint health and wellbeing strategy?</li> <li>If yes which priorities does it address?</li> <li>To what extent is the balance of existing local service delivery being challenged?</li> <li>Does the strategy clearly demonstrate and distinguish between primary, secondary and tertiary prevention for key priorities and groups? (think about how strategy will target vulnerability, early intervention for at risk and prevention)</li> <li>Does the strategy clearly articulate the shift from responsive to preventative interventions?</li> <li>Does the strategy support local community initiatives to deliver health and wellbeing outcomes?</li> </ul>		

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	Comments	RAG rating
B) Impact on population health outcomes and reducing health inequalities		
Prompts:		
<ul> <li>How ambitious is the strategy?</li> <li>Does the strategy state explicit outcomes?</li> <li>If yes to above, is there an explanation of how these local outcomes relate to the national outcome frameworks?</li> <li>Does the strategy explicitly mention proposals on how it will reduce health inequalities and health inequities? <i>Include vulnerable groups</i></li> <li>How clearly are health inequalities, and their relationship with other inequalities, understood and explained?</li> <li>Does the strategy have any adverse impact on health inequalities?</li> <li>Does the strategy clearly explain how it will work to address the wider determinants of health with other partners? e.g. housing, transport</li> <li>Does the strategy clearly articulate a shift from block commissioning of service outputs to outcomes for populations?</li> </ul>		

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	Comments	RAG rating
) Monitoring and evaluation		
Prompts:		
<ul> <li>Does the strategy include how it will monitor progress?</li> <li>Does the strategy clearly articulate how actions, impacts and costeffectiveness will be reviewed?</li> <li>Are the objectives SMART: specific, measurable, accurate, realistic and timely?</li> <li>Will these support delivery of the HWB strategic outcomes and targets? (think about scale, population impact, link to the HWB Board's performance outcomes framework)</li> <li>Does the strategy include monitoring of public and patient experience (e.g. through use of "I" statements, patient's experience of whole system integration)</li> <li>Is there clear evidence that learning will be shared with the wider health and care economy?</li> </ul>		

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	Comments	RAG rating
5) Effective use of resources / value for money		
Prompts:		
<ul> <li>Is there an appropriate balance and evidence provided of a shift of resources from responsive to preventative interventions?</li> <li>Is there clear evidence of a timeline for disinvestment from historic provision to preventative interventions?</li> <li>How well are resources combined and pooled?</li> <li>Is there clear evidence provided that the strategy has:         <ul> <li>exploited all opportunities for collaborative commissioning and pooled arrangements</li> <li>removed duplication and demonstrated increased alignment across organisations</li> <li>evidence of effectiveness and efficiencies to the wider Staffordshire Health and Social Care Economy?</li> </ul> </li> <li>Does the strategy make best use of integrating services to make best use of resources?</li> <li>Does the strategy set out how it will "make every contact counts" to ensure resources are used effectively across the health and wellbeing system?</li> </ul>		

Members of pool who took part in the review:	
Date :	
Name and date of feedback to the lead officer:	