

<b>Topic:</b>	<b>Agreement on Responsibility Interfaces between Staffordshire Health and Wellbeing Board, the Collaborative Commissioning Congress and Healthy Staffordshire Select Committee</b>
<b>Date:</b>	<b>10<sup>th</sup> September 2015</b>
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<b>Report Type</b>	<b>For Decision</b>

## **1 Purpose of the Report**

- 1.1 Good practice guidance indicates that a Health and Wellbeing Board should agree a work programme between its business and that of the Healthy Staffordshire Select Committee. This paper seeks to outline the roles and responsibilities between the two, to support that work programme.
- 1.2 In addition, Staffordshire and Stoke on Trent CCG's, together with Staffordshire County Council, Stoke-on-Trent City Council and NHSE have recently committed to create a joint Transformation Programme managed through the Collaborative Commissioning Congress. This paper therefore seeks to clarify the respective responsibilities between the Board and the Congress.
- 1.3 There are two Health and Wellbeing Boards (in Staffordshire and Stoke on Trent respectively) and this will continue. This paper outlines the proposed inter-relationships between the Staffordshire Health and Wellbeing Board, the Congress and Healthy Staffordshire Select Committee.

## **2 The Collaborative Commissioning Congress (CCC)**

- 2.1 This is a relatively new collaborative arrangement which will oversee the transformational change required in the local health and care system to result in a clinically and financially sustainable system. . the CCC includes the six CCGs, two local authorities and NHSE. In some ways it is a response to the feedback in the KPMG Distressed Health Economy report about the lack of a joined up strategic approach. The Congress will work closely with the Clinical Leaders Group and the Provider Engagement Group and has already met with Healthwatch to ensure effective patient and public engagement. It is anticipated that its remit will continue to evolve over the next few months and therefore this is a statement of its current position only.
- 2.2 The Terms of Reference are in development. It is important that key decisions about delegation and programmes of work are not rushed. .
- 2.3 The membership and voting mechanisms for the Congress are in development.
- 2.4 The main function of the Congress is to clearly set out the collective vision for

the health and care system of Staffordshire, which enables the system to be clinically and financially sustainable within the next three to five years.

- 2.5 To achieve this there is a plan for transformation that brings together, through collaboration, the six CCGs and local authorities and sets out how commissioners are going to work differently to achieve that ambition.
- 2.6 In addition the Congress has been established to:
  - Create a System-wide response to health and care
  - Respond to the NHS England challenge
  - Identify leaders for change
  - Plan for transition
  - Enhance evidence based approaches as well as clinical and public engagement
- 2.7 The vision for the transformation is to create a health and care economy where people are supported to feel well at home, with high quality support and services when they need them. Ie to deliver both Health and Wellbeing Strategies.
- 2.8 There are three main tenets for this transformation which are being developed into workstreams:
  - supporting people to stay fit and well;
  - identifying those who are at high risk to stay independent;
  - and supporting those who receive care to do so in a high quality safe and cost effective way.
- 2.9 The transformation plan is extensive and inter-dependent with a number of enablers. A schematic is attached at Appendix A.

### 3 Relationship between the Board and the Healthy Staffordshire Select Committee

- 3.1 The Health and Wellbeing Board was established under the Health and Social Care Act 2012 legislation. The Healthy Staffordshire Select Committee works in accordance with the legislation set out in the Health and Social Care Act 2001 as amended by the National Health Service Act 2006 and subsequent regulations including the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.
- 3.2 The following table outlines the distinctive roles of the Board and the Select Committee:

Staffordshire Health and Wellbeing Board	Healthy Staffordshire Select Committee
<ol style="list-style-type: none"> <li>1. Prepare and publish a Joint Strategic Needs Assessment for Staffordshire. In doing so the Board must involve Healthwatch, undertake a wider stakeholder engagement exercise and engage each District and Borough Council.</li> <li>2. Jointly agree and publish a Staffordshire Joint Health and Wellbeing Strategy (JHWS), setting out ambitious outcomes for improved health and wellbeing across Staffordshire.</li> <li>3. Promote the integration of health and social care services to advance the health and wellbeing of the people of Staffordshire.</li> <li>4. Provide advice, assistance and other support in encouraging arrangements under section 75 of the NHS Act 2006 (such as joint commissioning and pooled budgets where appropriate).</li> <li>5. Ensure patient and public voice is heard as part of the Health and Wellbeing Boards decision making, receiving and considering patient and public feedback through the statutory board membership and regular reports of Staffordshire Health-watch.</li> <li>6. 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”.</li> </ol>	<ol style="list-style-type: none"> <li>1. The local authority may review and scrutinise any matter relating to the planning, provision and operation of the health services in its area. In doing so it may take account of all relevant information including that available via Healthwatch.</li> <li>2. Where there is a substantial variation in the provision of service then a commissioner must consult the overview and scrutiny committee and set out the timescales in which a decision is to be taken.</li> <li>3. The authority may report a substantial variation to the Secretary of State in writing where the authority is not satisfied that consultation on any proposal has been adequate in relation to content or time allowed, that the reasons given are adequate or where the authority considers that the proposal would not be in the interests of the health service in its area.</li> <li>4. Review and scrutinise matters relating to the planning, provision and operation of the health service in the area. This may well include scrutinising the finances of local health services.</li> <li>5. Require information to be provided by certain NHS bodies about the planning, provision and operation of health services that is reasonably needed to carry out health scrutiny.</li> </ol>

Staffordshire Health and Wellbeing Board	Healthy Staffordshire Select Committee
<p>7. Prepare and publish a Pharmaceutical Needs Assessment every 3 years (in addition, good practice is for the production of an Eye Health &amp; Sight Loss Needs Assessment including children’s eye health but this can be incorporated into the wider needs assessment).</p> <p>8. Provide an opinion as to whether CCG Commissioning Plans have taken proper account of the JHWS. The Board can in turn write to the NHS Commissioning Board outlining its opinion of the CCG Commissioning Plans, notifying the CCG at the same time.</p> <p>9. Review the extent to which CCG Commissioning Plans have contributed to the delivery of the JHWS</p> <p>10. Increase local democratic legitimacy in the commissioning of health and care services.</p>	<p>6. Require employees including non-executive directors of certain NHS bodies to attend before them to answer questions.</p> <p>7. Make reports and recommendations to certain NHS bodies and expect a response within 28 days.</p>

3.3 There are distinct but complimentary roles for the Health and Wellbeing Board and Healthy Staffordshire Select Committee. The Board has the legislative powers to review the extent to which CCG Commissioning Plans take proper account of the Health and Wellbeing Board Strategy. The Board will undertake an appreciative inquiry approach to ensure itself of alignment between commissioning intentions and the agreed direction of travel set by the Board. The Board will provide its opinion of those commissioning intentions back to the CCGs. It can also write to the NHS Commissioning Board informing it of the Board’s opinion on the commissioning intentions.

3.4 The Select Committee will be consulted on individual substantial variations that arise out of those commissioning intentions. The Select Committee will comment on the consultation process and seek assurances over the impact on health services for the local population. If not satisfied that the local impact is effectively mitigated then it needs to consider the sustainability of those services prior to making any referral to the Secretary of State.

3.5 This roles working in tandem provide a public and democratically influenced check and balance to proposals that will impact upon local communities. To aid this collaborative working across the 2 a joint protocol has been developed between the Board and the Select Committee. This is set out in appendix B. The protocol outlines communication between the two and alignment of work programmes to ensure effective and timely consideration of issue that supports the pace of transformation needed in the system to maintain patient care, clinical excellence, safety and sustainability.

## **4 Key Proposals for the System – Recommendations**

- 4.1 There are synergies between the programme of work of the Board and that of the Congress. The lead officers have met to establish which elements of the HWB Board programme align to the Fit and Well, High Risk and Independent and those Receiving Care workstreams of the Congress transformation programme. The proposed alignment is attached at Appendix C and the Board is asked to affirm this.
- 4.2 The Better Care Fund schemes are integral to the transformation of the health and care system. The individual schemes have been mapped to the Congress transformation programme and will be delivered as part of its core business. The BCF progress will be reported to the Congress and the Health and Wellbeing Board. The Board is asked to endorse this approach.
- 4.3 The Integrated Commissioning Boards will have key inter-dependencies with the Congress transformation plan. These have been mapped and will be considered by the Congress as part of its plan. However, for now the various Integrated Commissioning Boards will continue to operate (and take direction from the Congress where appropriate and relevant, for example in respect of Mental Health and All Age Disabilities.) The Board is asked to note this.
- 4.4 The Board's Intelligence Hub will continue its work to align strategies and commissioning intentions, to produce the eJSNA, and to provide the strategic outcomes framework for Living Well in Staffordshire. It will share and coordinate its work in conjunction with the Congress to ensure these factors align across the whole system.
- 4.5 The Board provides the public vehicle for commissioners to collectively come together to set out the direction of travel and evidence to local people and communities that there is a plan, that it is working and is having an impact.
- 4.6 The Congress develops the transformation delivery plan that brings commissioners together to act upon the requirements of the system, to present a unified position on commissioning proposals, and to lead the development of strategies that bring the system together. It will update the Board regularly on its progress. The Board is asked to endorse the interfaces as documented at Appendix C.
- 4.7 The Healthy Staffordshire Select Committee considers specific substantial variations proposed by commissioners and the consultation process they propose to undertake. It tests the relevance of strategies and monitors impact. The Board is asked to endorse the draft working protocol (Appendix B) prior to discussions with the Healthy Staffordshire Select Committee.

Appendix A: schematic of Congress Programme

Together We're Better



## Appendix B: Working Protocol between the Health and Wellbeing Board and the Healthy Staffordshire Select Committee

### Introduction

The Staffordshire Health and Wellbeing Board and Healthy Staffordshire Select Committee have distinct but complimentary responsibilities in respect of the health and care economy in Staffordshire. Health and care is going through an ongoing period of transformation locally and nationally. The Board and Select Committee have ongoing roles in championing transformation that is driven by improved patient outcomes, clinical excellence and safety and result in a system that is financially sustainable.

The key roles for the Board and Select Committee are as follows:

Staffordshire Health and Wellbeing Board	Healthy Staffordshire Select Committee
<ol style="list-style-type: none"> <li>1. Prepare and publish a Joint Strategic Needs Assessment for Staffordshire. In doing so the Board must involve Healthwatch, undertake a wider stakeholder engagement exercise and engage each District and Borough Council.</li> <li>2. Jointly agree and publish a Staffordshire Joint Health and Wellbeing Strategy (JHWS), setting out ambitious outcomes for improved health and wellbeing across Staffordshire.</li> <li>3. Promote the integration of health and social care services to advance the health and wellbeing of the people of Staffordshire.</li> <li>4. Provide advice, assistance and other support in encouraging arrangements under section 75 of the NHS Act 2006 (such as joint commissioning and pooled budgets where appropriate).</li> <li>5. Ensure patient and public voice is heard as part of the Health and Wellbeing Boards decision making, receiving and considering patient and public feedback</li> </ol>	<ol style="list-style-type: none"> <li>1. The local authority may review and scrutinise any matter relating to the planning, provision and operation of the health services in its area. In doing so it may take account of all relevant information including that available via Healthwatch.</li> <li>2. Where there is a substantial variation in the provision of service then a commissioner must consult the overview and scrutiny committee and set out the timescales in which a decision is to be taken.</li> <li>3. The authority may report a substantial variation to the Secretary of State in writing where the authority is not satisfied that consultation on any proposal has been adequate in relation to content or time allowed, that the reasons given are adequate or where the authority considers that the proposal would not be in the interests of the health service in its area.</li> <li>4. Review and scrutinise matters relating to the planning, provision</li> </ol>

<p><b>Staffordshire Health and Wellbeing Board</b></p>	<p><b>Healthy Staffordshire Select Committee</b></p>
<p>through the statutory board membership and regular reports of Staffordshire Health-watch.</p> <ol style="list-style-type: none"> <li>6. 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”.</li> <li>7. Prepare and publish a Pharmaceutical Needs Assessment every 3 years (in addition, good practice is for the production of an Eye Health &amp; Sight Loss Needs Assessment including children’s eye health but this can be incorporated into the wider needs assessment).</li> <li>8. Provide an opinion as to whether CCG Commissioning Plans have taken proper account of the JHWS. The Board can in turn write to the NHS Commissioning Board outlining its opinion of the CCG Commissioning Plans, notifying the CCG at the same time.</li> <li>9. Review the extent to which CCG Commissioning Plans have contributed to the delivery of the JHWS</li> <li>10. Increase local democratic legitimacy in the commissioning of health and care services.</li> </ol>	<p>and operation of the health service in the area. This may well include scrutinising the finances of local health services.</p> <ol style="list-style-type: none"> <li>5. Require information to be provided by certain NHS bodies about the planning, provision and operation of health services that is reasonably needed to carry out health scrutiny.</li> <li>6. Require employees including non-executive directors of certain NHS bodies to attend before them to answer questions.</li> <li>7. Make reports and recommendations to certain NHS bodies and expect a response within 28 days.</li> </ol>



## **Working Principles and Commitments**

To foster closer working arrangements and to avoid duplication it is agreed that:

The **Staffordshire Health and Wellbeing Board** will:

1. Inform and engage the Healthy Staffordshire Select Committee in any review and refresh of the JSNA and Living Well Strategy to ensure they accurately reflect the current priorities of the communities of Staffordshire.
2. Share its work programme with the Select Committee to foster joint collaboration and sharing of information.
3. Share its annual report with the Select Committee highlighting progress made against the Living Well Strategy.
4. Highlight health inequality or other matters that the Select Committee may consider investigating in greater depth.
5. Share its findings and any issues arising through its consideration of CCG Commissioning Plans that have been shared with the CCGs.
6. Consider and respond to any recommendations made to the Board by the Select Committee.
7. Respond to any direct calls for evidence made by the Select Committee regarding matters it is considering.

The **Healthy Staffordshire Select Committee** will:

1. Share its work programme to foster joint collaboration and the sharing of information.
2. Scrutinise and comment on any review and refresh of the JSNA and Living Well Strategy.
3. Consider as part of its work programme any health inequality issues highlighted by the Board that may warrant closer investigation by the Select Committee.
4. Share any key findings from its assessment of Quality Accounts, Health Accountability of NHS Trusts or its formal comments on substantial variations to inform the work and direction of the Board and to provide learning around key issues of local authority non Executive Member concerns.
5. Share with the Health and Wellbeing Board any emerging concerns that the Select Committee have regarding commissioning intentions as part of the Board's analysis of commissioning intentions.
6. Write to the Board with any recommendations arising from a scrutiny investigation that calls for the Board to consider or take action on an issue.

The purpose of the protocol is to ensure effective communication that supports the ongoing drive to transform health and care services across Staffordshire in terms of patient outcomes and sustainability. The protocol more widely will help support commissioners and providers in terms of the differing and complimentary roles of the two bodies thus reducing duplication.

### Appendix C Health and Wellbeing Board and Congress Programmes

