1st October 2015

ITEM: 7

Health and Wellbeing Board

Health and Wellbeing Board Self-Assessment

Report of: Ceri Armstrong, Strategy Officer

Accountable Head of Service: N/A

Accountable Director: Roger Harris, Director of Adults, Health and Commissioning

This report is public

Executive Summary

This report outlines the elements of the Local Government Association's Improvement Offer – aimed at supporting Health and Wellbeing Boards to develop towards effective system leadership. The report identifies a suggested course of action which is to commit to participating in the facilitated self-assessment process.

The LGA's improvement offer supports its view on the future of health and wellbeing boards – as contained within its report 'Making it better together – a call to action on the future of health and wellbeing boards'. The report was developed in conjunction with NHS Clinical Commissioners and endorsed by the NHS Confederation.

The improvement offer and the recommendations contained within this report therefore aim to support Thurrock's Health and Wellbeing Board to move towards a future state – one which shifts from relationship building to system leadership. The improvement offer is one means of assisting the Board with making that transition.

1. Recommendation(s)

1.1 For the Health and Wellbeing Board to agree to participate in the LGA's facilitated self-assessment process.

2. Introduction and Background

- 2.1 The Health and Wellbeing Board has oversight of the entire local health and care system and the factors that impact locally on health and health inequalities. As such, Health and Wellbeing Boards will have a growing role in bringing the system together and ensuring that it moves in the right direction.
- 2.2 The transformation of health and social care in Thurrock and its composite parts will be overseen by the Board. Thurrock's transformation journey will be captured within the refreshed Joint Health and Wellbeing Strategy.

Successful transformation will see Thurrock residents remaining healthy for longer, and better able to manage and prevent the decline of ill health – combined with greater choice and control. This will mean a health and care system that shifts resource and focus away from unplanned care and crisis management to prevention and early intervention. The extent of the success will depend upon both local and national factors and enablers.

- 2.3 In order to make the shift described in 2.2, Health and Wellbeing Boards will need to consider making greater use of the powers and freedoms available to them particularly if they are to be successful in improving the population's health and wellbeing outcomes. This may lead to the Board having an enhanced role and greater responsibilities.
- 2.4 The Local Government Association (LGA) is a strong advocate of Boards as system leaders and as leaders of health and care place-based commissioning. Whilst the LGA recognises and has called on the Government to remove barriers at a national level to enable HWBs to become effective system leaders it also calls on Boards to use their existing powers to drive health improvement. The LGA, alongside NHS Clinical Commissioners and NHS Confederation has developed a paper 'Making it better together a call to action on the future of health and wellbeing boards' setting out how Health and Wellbeing Boards should be supported to bring about a radical transformation in the health of communities.
- 2.5 To support Boards in their growing role and to ensure they 'move on from relationship building to making an impact on the delivery of services', the LGA has established an improvement programme. It is recommended that the Board uses elements of the LGA's improvement programme so that it can both consider its current and future role and assess what it and Board members need to do to become to develop into that role. The improvement programme will also help the Board to ensure it is positioned to enable the delivery of the refreshed Health and Wellbeing Strategy. This paper will outline the options available to the Board as part of the LGA's offer.

3. Issues, Options and Analysis of Options

- 3.1 The Care and Health Improvement Programme (CHIP) consists of the following elements:
 - Health and Wellbeing Board Self-Assessment (including facilitated self-assessment);
 - Leadership Offer including HWB Chairs and Adult Social Care Portfolio Holder Induction Session and Leadership Essentials for HWB Chairs; and
 - Health and Wellbeing Board Peer Challenge.

Self-Assessment Tool

3.2 The Self-Assessment Tool 'aims to support the rapid development of HWBs across the country towards effective system leadership and innovation and to step up to the challenge of an enhanced role'. It covers the following themes:

- Vision, ambition and the role of the health and wellbeing board;
- System leadership and partnership working;
- Ensuring delivery and impact;
- Communication and engagement; and
- Integration and system redesign.
- 3.3 The LGA suggest that the tool can be used in a number of different ways:
 - As a checklist to help agenda setting;
 - As part of a facilitated self-assessment;
 - To focus discussions during development sessions and action plans;
 - As a survey sent to each member of the health and wellbeing board with responses analysed to inform a report and discussion.
- 3.4 The facilitated assessment offer includes a facilitator for the day to work through the self-assessment tool with the Board and can be tailored to meet local requirements.

Peer Challenge

- 3.5 The Peer Challenge involves a team of between four to six people spending time on-site with Board members to challenge around the following areas:
 - Clarity and purpose of the Board;
 - Building a model of shared learning within the Board;
 - Working with partners to develop the systems leadership role;
 - Ensuring delivery and impact; and
 - Integration and system redesign.
- 3.6 The process includes the following:
 - Observation of the Board;
 - Position statement prepared by the Board;
 - Pre-site reading based on evidence provided by the Council and Board;
 - Pre-site analysis;
 - Pre-site survey with Board members;
 - 3 days of on-site activity including a 'setting the scene' meeting, interviews with individuals and groups, focus groups, and a final feedback session;
 - Written feedback; and
 - Follow-up work not part of the actual Peer Review, but available on request depending upon the outcome of the review e.g. action planning workshop.

Leadership Offer

3.7 The leadership offer is aimed at Health and Wellbeing Board Chairs and Adult Social Care Portfolio Holders. The offer consists of an induction session for chairs and a leadership essentials course.

Recommended course of action

- 3.8 It is recommended that the Board participates in the LGA's offer. There is every indication that the role and focus of Health and Wellbeing Boards as system leaders will continue to grow. This coupled with the refresh of the Health and Wellbeing Strategy makes taking part in the improvement a sensible proposition.
- 3.9 The facilitated self-assessment would be a less resource-intensive option and provide the Board with some insight of where it is and what it needs to do to establish itself as an effective system leader. The Peer Review is a more thorough and resource-intensive piece of work, and Board members will need to fully commit to the process to make it meaningful.
- 3.10 The recommendation is that the Board undertake the facilitated selfassessment as a first step, and use the results of the self-assessment as a benchmark for future work – including the possibility of a peer review. The self-assessment should provide the Board with sufficient insight and enable any key areas of development to be highlighted. Depending upon the results of the self-assessment, the Board may also wish to commission an actionplanning session.

4. Reasons for Recommendation

- 4.1 It is recommended that the Board participates in the LGA's improvement programme for the reasons outlined within this report e.g. the growing role of Health and Wellbeing Boards as system leaders and place shapers.
- 4.2 It is recommended the Board participates in the facilitated self-assessment element of the improvement programme for the reasons outlined in 3.9.

5. Consultation (including Overview and Scrutiny, if applicable)

5.1 Consultation will take place via the Health and Wellbeing Board.

6. Impact on corporate policies, priorities, performance and community impact

- 6.1 The Health and Wellbeing Board has the lead for the Community Strategy priority 'improve health and wellbeing'. The improvement programme will ensure that the Board understands its current and future role and identifies actions required to be effective.
- 7. Implications
- 7.1 Financial

Implications verified by:

Michael Jones

Strategic Resources Accountant

There are no financial implications arising from this report

7.2 Legal

Implications verified by:

Solomon Adeyeni Legal and Democratic Services

None identified.

7.3 **Diversity and Equality**

Implications verified by:

Community Development and Equalities Manager

The Health and Wellbeing Board has responsibility for:

- Improving the health and wellbeing of the people in their area;
- Reducing health inequalities; and
- Promoting the integration of services.

Ensuring the Board is effective in fully understanding and delivering its role will help ensure these responsibilities are met.

Natalie Warren

7.4 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None identified.

- 8. Background papers used in preparing the report (including their location on the Council's website or identification whether any are exempt or protected by copyright):
 - Making it better together a call to action on the future of health and wellbeing boards, LGA, NHS Clinical Commissioners, and NHS Confederation;
 - LGA Care and Health Improvement Programme (CHIP), LGA, July 2015; and
 - Creating a better care system, Ernst & Young LLP, June 2015.

9. Appendices to the report

• None.

Report Author:

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