

Health & Wellbeing Board

Wednesday 25 March 2015

Health & Wellbeing Peer Challenge – January 2015

Recommendations

The written report has recently been received from the Peer Challenge Team and these are their recommendations :-

- (1) Return to first principles and take steps to ensure there is:
 - A clear definition of the purpose of the HWB and its added value
 - More focus on developing a culture of "we" and "us"
 - Moving towards acceptance that all partners are equal and should take ownership
 - Agreement and understanding of each organisation's role in the delivery of outcomes
 - Determine who holds the ring on activity and performance
- (2) Review membership of the Board.
 - A health partner should be considered in the role of Deputy Chair (or should this be Co-Chair?)
 - Who sits around the table and why e.g., providers, 3rd sector
 - Roles and responsibilities of individual Board members
- (3) Develop clear and distinct support for the Chair
- (4) Clarify and potentially simplify the complex structure beneath the Board and its interrelations with WCC's Health and Scrutiny Committee
- (5) Focus on the development of a joint implementation plan for use by all partners across Warwickshire
- (6) Work collectively to enable:
 - a. Clarity around pooled budgets, resources and risks
 - b. Clear performance management processes to develop
- (7) Review your approach to digital media, including up to date information on the webpages
- (8) Consider whether the Health and Wellbeing Board needs its own identity and how its success is communicated to the wider community

1.0 Background

1.1 The Warwickshire Health & Wellbeing Board was subject to a peer challenge on 20 – 23 January 2015 as part of the Local Government Association's Health & Wellbeing System Improvement Programme. During this period they spoke with more than 110 people, including a range of stakeholders.

1.2 The LGA prescribed framework for their challenge was five headline questions:

1. Is there a clear and appropriate approach to improving the health and wellbeing of local residents?
2. Is the HWB at the heart of an effective governance system? Does leadership work well across the local system?
3. Are local resources, commitment and skills across the system maximised to achieve local health and wellbeing priorities?
4. Are there effective arrangements for evaluating impacts of the health and wellbeing strategy?
5. Are there effective arrangements for underpinning accountability to the public?

1.3. We also asked them to comment on:

- **Leadership:** the Board's capability and capacity to lead the health and wellbeing system in Warwickshire, and the extent to which that leadership is being driven collectively by all partners.
- **Governance:** whether the current make-up of the Board, consisting of voting members and active observers, provides the right balance between effective decision making and appropriate stakeholder engagement.
- **Strategy and Planning:** is the Board using its strategic position to influence a Warwickshire-wide health and wellbeing "offer", which draws together the provision of all partners, and is there a robust and integrated approach to planning, both in terms of the Board's own agenda and the distribution of funding.
- **Relationships:** given the complexity of having three Clinical Commissioning Groups, one of which also spans Coventry and therefore reports to two separate Health and Wellbeing Boards, how well are we managing relationships and how could we operate better collectively as a single body.
- **Operation:** as with any partnership body, there is a danger that we all just go back to our day jobs and focus on organisational priorities, rather than the collective strategy.

2.0 **Headline Messages**

2.1 The following is their summary of their findings :

The work of the HWB is visibly led by the Chair, who is well respected and works hard to nurture relationships across the health economy in Warwickshire. The long term aspiration of the Board is clearly articulated in the revised Health and Well Being Strategy. There is significant appetite from partners for the system to improve and for the HWB to be at the heart of that improvement, managing performance, co-ordinating effort and unleashing creativity and innovation. At local level there is real and tangible energy to make a difference, as reflected in the range of projects underway led by partners.

Your self-assessment showed a good level of self-awareness and identified a number of issues where you would like to make progress, including an ambition to create more impact through the working of the Board. Currently that “added value” is hard to see because not enough “new” activity is taking place under the guise of the strategy.

The Health and Wellbeing Strategy has been agreed but how it will be implemented is less clear, and the absence of an action plan for delivery means that partners and stakeholders largely are uninformed about what will happen next to bring about change for residents and service users across the county. There is limited evidence of significant activity and delivery between meetings: sharing responsibility for delivery will mean that coordinated purposeful activity can begin to take place.

Warwickshire’s health economy is viewed as complex due to your inherited factors and geography, including 3 Clinical Commissioning Groups (CCGs), your proximity to Coventry, a lack of co-terminous boundaries with NHS providers who have a wide geographical catchment, a lack of coterminosity for one of the CCGs, and a large diversity of need across your local population. These factors are beyond your gift to control, which means that the role of the Board, how it is comprised and how it works together is of particular significance in bringing about long term improvement.

As in other areas across the country the HWB has evolved from its shadow status into a fully responsible body, and all HWBs are regarded on a statutory basis as a committee of upper tier councils. This means that by its inherent design there is a risk of over-dominance from local authority partners, unless the Board decides to be brave and take radical steps to enable other stakeholders to play a stronger and equal role.

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There are a wide range of views about the purpose and scope of the Board, suggesting that the overall purpose of the HWB is not yet widely understood. Your self-assessment reflects the mixed views that we heard about the purpose of the Board and the Board's governance:

- Is it a committee of the County Council?
- Is it a partnership board?
- Is it responsible for health and social care integration?
- Is it responsible for commissioning services?
- "It's more of a health and county things"
- "It has lots of responsibilities but little authority"
- A lack of clarity about its role in scrutinising performance of partners and providers and how this relates to the County Council's scrutiny arrangements, as well as to Healthwatch.
- Some providers would like to be more involved and work with the Board to deliver
- Some providers have intelligence and best practice that they would like to share but don't feel they are able to

In Warwickshire there is inconsistent input into the Board's business from all key members of the health economy, to the extent that the strategy is at risk of not being delivered. There are mixed views about what the purpose of the Board is and who should have a seat at the table means that it is currently difficult to identify the overarching authority of the Board. In our view the current arrangements need revisiting to ensure that health partners can play a greater strategic and leadership role on an equal footing, and help the HWB move from high level discussions into shaping action on the ground. Changing the Board's membership however strays into local politics and tensions, but it needs to be addressed if the Board is to make progress.

The Chair is playing a tremendous role in engaging partners and developing relationships, but there is an over-reliance on the Chair to manage and lead engagement. Having a Deputy Chair from a health partner body would complement her work and help further enhance strategic relationships. The work of the Board also needs to have more input from officers, either from Warwickshire CC or its partners, to provide structured support for the Board's business. This should include resources for better agenda management, Board development, a forward plan of business for the Board, and performance management.

It is clear that there is appetite for change and everyone wants the Board and its impact to improve, as one of the partners told us:

"The Health and Wellbeing Board is on the right journey, it is much better than it was, but it could be great."

Background Papers

1. LGA Letter to Cllr Izzi Seccombe dated March 2015.

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