

**SUNDERLAND EARLY IMPLEMENTER  
HEALTH AND WELLBEING BOARD**

30 March 2012

**NATIONAL LEARNING NETWORK FOR HEALTH AND WELLBEING  
BOARDS**

**Report of the Executive Director of Health, Housing and Adult Services**

**Purpose of the Report**

To update the Board on the work of the National Learning Network for Health and Wellbeing Boards.

**Background**

The Health & Social Care Bill was published in January 2011 and set out proposed major reforms for Health and Care Services. The Bill is in its final stages and is due to complete the Parliamentary process during March. A key proposal in the Bill is the establishment of Health & Well Being Boards by Local Authorities in April 2013, with them operating in Shadow form during 2012/13. In preparation for their introduction, the Department of Health offered the opportunity for local Council's with their partners to establish Early Implementer Boards during 2011/12. The City Council approved the establishment of an Early Implementer Health and Well Being Board in July 2011.

In October 2011, as part of the commitment to the process of developing the new Boards, the Department of Health invited applications from Early Implementers to participate in Learning Sets. The intention of the sets is to gather and share learning from the Early Implementer phase to support Boards as they make their transition to Shadow status and subsequently take up the full statutory role.

A successful application was made by the Sunderland Board to participate in the programme, and we were allocated to the set which is considering how Boards can make the best use of collective resources.

**National Learning Set Programme**

The programme was launched in November 2011. More than 90 out of 152 emerging Health and Wellbeing Boards from across England are represented in the learning sets. The sets are focused on themes that early implementers have said are of most interest and importance to Health and Wellbeing Board members.

Each learning set comprises members from local government and NHS organisations, with a nominated policy lead from the Department of Health. The peer-to-peer learning approach encourages senior people to share

solutions that are already working, shape new solutions and influence national policy makers in the areas that matter to emerging boards and their constituent members.

There are seven Learning Set topics, which are:

- **Improving the health of the population**  
To develop the understanding of how health and wellbeing boards can drive effective action by the NHS, local government and wider partners across all domains of public health. The sets include a focus on the role of Boards in tackling health inequalities.
- **Bringing collaborative leadership to major service reconfiguration**  
To develop the understanding and the best practice in how health and wellbeing boards can ensure collective leadership across the NHS and local government where major service reconfiguration is potentially required.
- **Creating effective governance arrangements**  
To develop the understanding and the best practice of how Boards are run in a way which engages local stakeholders, enhances democratic legitimacy, and delivers their accountabilities. A particular area of focus will be the relationship between boards and scrutiny committees.
- **How do we “hard wire” public engagement into the work of the board?**  
To develop the understanding and the best practice about how health and wellbeing boards can embed engagement with the public, patients, carers and citizens as an integral part of their work. This learning set will work closely with the HealthWatch pathfinder programme.
- **Raising the bar on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies**  
To develop the understanding and the best practice about how to carry out a Joint Strategic Needs Assessment [JSNA] and how this informs the work of the board in developing the Joint Health and Wellbeing Strategy to shape commissioning plans across the NHS and local government.
- **Making the best use of collective resources.**  
To develop the understanding of how the role of health and wellbeing boards can drive the best use of resources across the NHS and local government.
- **Improving services through more effective joint working**  
To develop the understanding of how health and wellbeing boards can further improve service delivery and outcomes in specific services by ensuring greater integration between the NHS, local government and other partners. There are general sets for this theme and one specifically for children and families services.

## **Making Best Use of Collective Resources Learning Set**

The learning set was established in December 2011. The Executive Director of Health, Housing and Adult Services from the City Council acts as the representative from the Sunderland Board. Set meetings are virtual rather than face to face, and there have been four such meetings. The meetings have been convened using 'WebEx' technology which provides live, web-based conferencing.

In addition to the virtual meetings there has been an event in London which brought together all learning sets and provided an opportunity to cross fertilise ideas and learning.

Membership of the set is drawn from across the country and includes a mix of Board level members from Local Government, PCTs and CCGs. The work of the set will produce a reference resource available to all Health & Wellbeing Boards that should assist Boards in providing the required leadership to get better use of the collective resources available to the whole system in their area.

The particular products in development include; a set of questions for Boards to prompt consideration of key issues, a series of 'tips' for Boards as they consider the use of collective resources, a list of the range of resources that may be available, and an explanation of terms regularly used by the various partner organisations. In addition the work will cross reference and link to case study examples of perceived good practice.

A draft of the work is due to be produced by 29 March and it is proposed to circulate it to members of the Board, the Children's Trust, and the Adult Partnership Board for comments which will be fed back for consideration as the process develops.

The work of all the Learning Sets will be submitted to the Department of Health during April after which it will be moulded into a single final product.

### **Recommendations**

The Health & Wellbeing Board is recommended to

1. Note the content of the report.
2. Agree to circulate the draft product from the 'Making the Best Use of Collective Resources' to members of the Board and the Advisory Groups for comment.
3. Receive a future report following the completion of the work by the National Learning Network.

