

SUNDERLAND HEALTH AND WELLBEING BOARD

26 July 2013

HEALTH AND WELLBEING BOARD – PRIORITIES AND PERFORMANCE MANAGEMENT

Report of the Executive Director of Health Housing and Adult Services

1.0 Purpose of the Report

To review the outcome of the 'System Leaders or Talking Shop' Board Development Session that took place on the 7th June 2013, ratify the priorities agreed at the meeting for 2013 and 2016 and consider any further action required.

2.0 Background

The June Board development session considered the role and purpose of the Board. It aimed to provide a forum to develop a collective understanding of the purpose and value added of the Board, determining collective success measures and clear leadership and accountability based on the delivery of the Health and Wellbeing Strategy (HWBS).

The session was facilitated by Judith Hurcombe of the Local Government Association.

As not all Board members attended the session this report seeks approval of the priorities agreed at the session, agreement of any amendments to priorities, agreement of performance management and assurance processes and clarification on further action.

3.0 Establishing Priorities

The session focussed on two questions:

- Q1. What difference will the Board have made to improving Health in Sunderland in 12 months time?
- Q2. What difference will the Board have made to improving Health in Sunderland by 2016?

The broad consensus from the group was that the top 3 priorities for year one were:

- 1. To have moved on service integration between the local authority and NHS in a meaningful way
- 2. To focus on early years, children and young people
- 3. To have established the Board as a system leader

Similarly the consensus was that in 3 years time, the Board would want to be able:

- 1. to be universally recognised as the system leader who can and is legitimately challenging other parts of the system
- 2. to have made a demonstrable difference for children and young people

3. to have concrete evidence of service integration and co-production
4. to have strengthened community assets across all partners.

The full transcript of the discussion is included as appendix 1.

The Board is requested to review the above priorities and suggest any additional priorities for year 1 and over 3 years.

4.0 Assurance and Performance Management

The Session then asked the Board how the HWB Strategy should be delivered and performance managed. The discussions centred around the need to 'capture the difference' – under the assumption that 80% of activity to deliver the strategy will be carried out as business as usual within the partner organisations of the Board and the broader system. This should be monitored and performance managed through reporting against the Public Health Outcomes Framework, NHS Outcomes Framework and Social Care Outcomes Framework to the Adults Partnership Board and Children's Trust.

Reports would come to the HWBB on an annual basis and on an exception basis whenever the advisory boards felt that it was necessary to escalate issues of concern or underperformance for joint action.

The HWBB specific performance reporting should focus on the 20% - or the things where the Board will show value added, and focus on the short and long term priorities as identified above.

5.0 Further Actions

There are a number of pieces of work and potential opportunities that could also help achieve the Board's key objectives. These include:

- The imminent action planning phase of the HWBS and the opportunity to focus resources on activity that will generate the greatest improvements to health
- The Council and CCG's application to become a 'Health and Social Care Integration Pioneer'. If successful the Board and its partners will need to work together to make person-centred coordinated care and support the norm across the health and social care system, doing so at a scale and pace that will make a real difference.
- The Adults Board investigation into the links between urgent care and care homes, the frequency with which older people move between hospital and their care home, and how to improve the level and type of support that people receive across the range of service providers. This is expected to lead to better person-centred services through the development of seamless integrated services.
- The submission of the Big Lottery Better Start application which, if successful will provide significant resources to focus action on integrating services and improving outcomes for children and young people
- The LGA offers of peer reviews throughout 2013/14, with potential corporate, social care and HWBB focuses.

6.0 Recommendations

The Board is recommended:

- To agree the record of priorities set at the developments session
- To suggest missing or additional priorities
- To agree the performance management arrangement to include the delegation of outcome framework reporting to the advisory groups
- To agree to receive exception reports from the advisory groups
- To pursue the further actions as detailed and receive updates on the impact of each in year.

Appendix 1 – Transcript of development session flip charts

Health and Wellbeing Board Development Session

GROUP A

Q1. What will be different in 12 months time?

- Need to understand commissioners intentions
- Need to understand how Healthwatch will play its part
- Need to understand how integrate services
 - Need to ask residents about what isn't working
- Get a collective understanding of priorities i.e. what will be decommissioned, **not** re-commissioned

- There will be a whole system understanding of how to improve residents health
 - Focus on infrastructure and wider determinants, but what will the interventions be e.g. schools and business project
- The HWBB will act as one, be unified, appreciate each others contribution (act as one organisation)
 - Possibly have a 12 month project on integration e.g. pilots across the 5 Areas
 - Healthy Sunderland Healthy Economy

Q2. What will have happened by 2016?

- Devolve budgets/pool budgets across health and social care to an Area level
- Do this across the themes of each Strategy Objective
- HWBB will have removed barriers to integration/pooled budgets
- By 2016 there will be no LSP –it will exist by default
- Is integration working.....ask residents
.....How to measure improvement?

GROUP B

Q1. What will be different in 12 months time?

- Moved on in the integration of services (LA/Health – hospital admissions and the best start in life)
- Set in the new culture before the system settles down
- Recognition about what the Board is/does, and its role (communications / clarity)
 - Across the Health and Social Care system
 - With the public (accountability)
- Keep up the momentum and motivation, balanced with evidence of some positive impact
- Understanding what's already happening (80%) and what is not/new (20%).

Q2. What will have happened by 2016?

- More complete integration of health and social care
- Best start in life for Sunderland's children and young people
- Universally recognised as system leader and can/are legitimately challenging other parts of the system e.g. housing, economic leadership, education
- Patients/public engaged in services appropriately and effectively

