

WESTMINSTER BRIEFING: THE FUTURE OF HEALTH & WELLBEING BOARDS

REPORT OF THE HEAD OF SCRUTINY AND AREA ARRANGEMENTS

1. PURPOSE OF THE REPORT

- 1.1 To provide an overview of the recent Westminster Briefing on the future of health and wellbeing boards held on 23 February 2016.

2. BACKGROUND

- 2.1 The Chair and Lead Member for Health, Housing and Adult Services, accompanied by a Scrutiny Officer, attended the Westminster Briefing on Tuesday 23 February 2016.

3. THE FUTURE OF HEALTH AND WELLBEING BOARDS: OVERVIEW

- 3.1 The Westminster Briefing focused on the future of Health and Wellbeing Boards (HWBs) which have become central to local health systems since their introduction but now face considerable challenges in the coming years. The briefing aimed to look at what can be done to develop local leadership, partnership working and community engagement that will ultimately improve health outcomes for everyone. The event panel were all highly experienced figures involved with many aspects of HWBs and included Professor Aliko Ahmed (Director – East of England, Public Health England), Cllr Daniel Yates (Chair, Brighton and Hove Health and Wellbeing Board), Anna Lynch (Director of Public Health, Durham County Council) and Dr Ian Orpen (Co-Chair, Bath and North East Somerset Health and Wellbeing Board).
- 3.2 Professor Aliko Ahmed represented Public Health England and provided a personal viewpoint on the future of HWBs. He gave a very brief recap of how HWBs had been established through legislation, the Health and Social Care Act 2012, and the general progress to date. At the crux of his presentation were 2 new policy drivers for HWBs in the shape of devolution and STPs (Sustainability and Transformation Plans) and what this meant for local HWBs. Professor Ahmed highlighted that devolution was generally based on local democratic leadership and accountability while STPs were place based plans built around the needs of the local population. It would be important for democratic leadership to have the legitimacy, executive leadership to have the feasibility and professionals to ensure credibility which would go to ensuring acceptability by the public and residents.

- 3.3 Cllr Jonathan McShane, Cabinet Member for Health, Social Care and Culture – London Borough of Hackney, explained as Chair of the HWB his experiences in Hackney. Cllr McShane highlighted the key components to an effective HWB which included committed leaders, shared purpose and tight focus, high quality support and a geography that works with a focus on place. In relation to the tight focus it was also noted that Hackney's HWB had reduced its main priorities to 4 issues namely dementia, obesity, mental health and smoking. Cllr McShane's presentation also acknowledged that there were a number of things that could get in the way including national initiatives that are not a priority locally, parallel power structures and regular changes in personnel. Cllr McShane did also recognise that an independent chair can help to create stability in the HWB. It was also noted that to create equality and inclusiveness each HWB meeting began with a briefing from Healthwatch.
- 3.4 Cllr Caroline Cooper-Marbiah, Cabinet Member for Adult Social Care and Health and also Chair of HWB – Merton Council, provided a presentation on tackling health inequalities and delivering prevention in challenging times. Some interesting points were raised around all members of the HWB being champions for the aspirations of the board and ensuring a wide 'buy-in' to the HWBs priorities. The importance of effective and on-going dialogue with local communities and people and the possibilities around social enterprises bridging some of the funding gaps were also highlighted.
- 3.5 There were a number of questions arising from the morning session and one of the key issues was around the challenge of getting other departments within a local authority to think about health and health outcomes. The importance of building bridges throughout an organisation to think about health and developing a health promoting council ethos were discussed.
- 3.6 There was also discussion around the fragmentation and lack of coordination, which had been witnessed by some present, within HWBs. This also raised the issue of the relationship between HWBs and Overview and Scrutiny functions. It certainly appeared that there was very little engagement between scrutiny and HWBs in many local authorities judged by the limited responses. Although it was acknowledged that some HWBs did appear at scrutiny committees on a six monthly basis, to provide an update on their work.
- 3.7 The afternoon session began with a presentation from Cllr Daniel Yates, Chair of Brighton and Hove Health and Wellbeing Board, which highlighted many of the positives about the HWB and also around the challenges that still remain. Cllr Yates made the point that HWBs had to be the public face of the health and care system and to support this Brighton and Hove HWB held a 30 minute question time at the beginning of each meeting to encourage and stimulate public involvement. It was also noted that one of the challenges that still remained was around the relationship between the HWB and the Overview and Scrutiny function. Brighton and Hove have

also amalgamated the Adult Social Care Committee into the HWB which means that there is a much broader agenda to facilitate.

- 3.8 Anna Lynch, Director of Public Health – County Durham, discussed how Durham had engaged with its local communities to improve local strategies. The HWB has a whole systems approach with the joint Health and Wellbeing Strategy being owned and valued by partners. Anna Lynch also commented that the HWB had a clear governance arrangement with Overview and Scrutiny through a memorandum of understanding. Also notable was the investment that had been made into children's engagement events to have the 'voice of the child' as an influence on the Health and Wellbeing agenda. There was also a clear voluntary and community sector involvement through the Community Wellbeing Partnership.
- 3.9 The final presentation of the day was from Dr Ian Orpen, Co-Chair - Bath and North East Somerset Health and Wellbeing Board, about the HWB experience in Bath and North East Somerset. Dr Orpen explained that relationships were fundamental to the successful operation of HWBs through the development of trust, communication and a shared vision. Progress in the HWB had seen the creation of Sirona Care and Health a community interest company providing community health and adult social care services. The HWB also had developed a comprehensive understanding of local need along with recognition of health and wellbeing as a core theme of the economic strategy. Dr Orpen also highlighted the Banes Wellbeing College a web based organisation providing information about, and delivering courses and activities to improve people's knowledge and assist in self-managing their health and wellbeing.

4. CONCLUSIONS

- 4.1 The variety of speakers from across the HWB landscape provided some interesting points and issues around the establishment, progress and future of HWBs. It was evident from many of the speakers that a clear commitment from both democratic and organisational leaders was a key aspect of any successful HWB. As well as this there was also a common thread of the importance of understanding the local need and ensuring the involvement of local communities and groups wherever possible. This has many benefits including promoting the HWB, developing relationships to assist in understanding that local need and providing an opportunity for local people to become involved in the health and wellbeing of their area.
- 4.2 The relationship between HWBs and Overview and Scrutiny functions varied greatly with some HWBs still struggling to understand the nature of the relationship. Noticeably throughout the day there was a clear recognition of the importance of overview and scrutiny and a willingness to engage but in many cases this was as far as it had gone. It should be noted that similar to Durham's memorandum of understanding, a health protocol was developed by scrutiny in Sunderland for engagement with HWBs.

- 4.3 Clearly there are still many challenges that face HWBs including the uncertainty of funding and the continued spending reductions faced by many public bodies. The importance of HWBs understanding their locality, engaging with local communities and being that public face of health and wellbeing will be at the very centre of any future development of HWBs.

5. RECOMMENDATIONS

- 5.1 It is recommended that the Scrutiny Committee notes the feedback from the Westminster Briefing.

6. BACKGROUND PAPERS

Westminster Briefing Paper February 2016

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