
Health and Wellbeing Board Governance - Summary Report

Committee considering report:	Council on 8 December 2016 Health and Wellbeing Board on 24 November 2016
Portfolio Member:	Councillor Graham Jones
Date Portfolio Member agreed report:	29 September 2016
Report Author:	Jo Reeves
Forward Plan Ref:	C3174

1. Purpose of the Report

- 1.1 So that the Health and Wellbeing Board (the Board) can drive improvement against the health and wellbeing strategy and fulfil its intended role as a system leader, this report defines how its governance will be amended to enable it to be more effective.

2. Recommendations

- 2.1 That the Board agree the shared narrative in paragraph 4.2 (of the Supporting Information) as it's overarching ambition.
- 2.2 That the Board agree that its role is to be a system leader and understand that this role informs the way it approaches its work.
- 2.3 That in addition to the strategic priorities, the Board focuses on driving improvement on alcohol related harm.
- 2.4 That the Board restructure its governance and create/ adopt the sub-groups as outlined in section 7 (of the Supporting Information).
- 2.5 That the Board alters its membership as outlined in paragraph 12.
- 2.6 That the Board commits to produce an annual report.
- 2.7 That the Board approves the terms of reference contained in Appendix C.

3. Implications

- 3.1 **Financial:** None
- 3.2 **Policy:** This report recommends the adoption of the new Health and Wellbeing Strategy.
- 3.3 **Personnel:** None
- 3.4 **Legal:** None
- 3.5 **Risk Management:** This report recommends a strengthened approach to the Board's oversight of risks in the system by using its Steering Group to report concerns by exception and also

by giving its sub-groups the autonomy to monitor and manage risks appearing in their own work streams.

3.6 **Property:** None

3.7 **Other:**

4. Other options considered

4.1 None

Executive Summary

5. Background - Peer Challenge

- 5.1 In 2015 Berkshire West's three Health and Wellbeing Boards invited a team of Peers to conduct a peer challenge as part of the Local Government Association (LGA) support offer to local authorities.
- 5.2 The peer challenge focussed on the Boards and partners who form the local health and wellbeing system, recognising that there was a window of opportunity to put Boards in the driving seat of local system leadership whilst being able to take on a place-based approach to commissioning adult social care/health and address the wider determinants of health. The peer challenge focussed on enabling the leadership of Boards to move into this space effectively.
- 5.3 The Peer team were on-site in West Berkshire on 1st March 2016 and conducted a number of interviews and task groups. In summary, the key recommendations from the peer challenge were:
- (1) Be clear about what you want from your HWB - is it the systems leader?
 - (2) Continue to hold difficult discussion about critical and important issues
 - (3) Generate pace and momentum to accelerate local improvement
 - (4) Strengthen performance management
 - (5) Develop and implement your communications and engagement strategy

6. Background - Development Sessions and Mapping Exercise

- 6.1 To agree a way forward from the recommendations of the peer challenge, the Board held development sessions on 26th May 2016 and 23rd June 2016. There was also a 'Wider Determinants of Health' conference.
- 6.2 At these sessions, the Board deepened their understanding of what system leadership will look like and stated that they wanted to unite behind a shared narrative to encapsulate their overarching ambition.
- 6.3 The sessions also revealed that the Board might need to change its membership in order to be system leaders.
- 6.4 System Leadership is a way of working that shares the burden of leadership to achieve large-scale change across communities. It goes beyond organisational boundaries and extends across staff at all levels, professions and sectors. It involves people using services, and carers, in the design and delivery of those services. System Leadership recognises that leadership is not vested in people solely through their authority or position; so it involves sharing leadership with others, coming together on the basis of a shared ambition and working together towards solutions.

- 6.5 A common theme across the sessions was that there was a gap around driving improvement against alcohol related harm, and partners were optimistic that the Board could achieve positive outcomes in a short time frame.
- 6.6 Another common theme was that partners wanted to build on success the Community Conversations that take place across the district as part of Building Communities Together and use this as the primary public engagement mechanism for the Board.

7. Next Steps - The Board's Shared Narrative

- 7.1 In response to the recommendations from the Peer Challenge and its development sessions, the Board had developed a shared narrative to encapsulate its reason for being and ambition:
- 7.2 "The Health and Wellbeing Board will enable communities to become healthier and stronger. We will listen together, deliberate together and make decisions together to close the gaps between communities that are doing well and those that need help."
- 7.3 This narrative will drive all that the Board do.

8. Next Steps - The Board's Purpose

- 8.1 In addition to its statutory purpose, the Health and Wellbeing Board have committed in its development sessions that it wants to be a systems leader.
- 8.2 The statutory purpose of the Health and Wellbeing Board is defined in the Health and Social Care Act 2012.
- 8.3 This means that the Board will continue to oversee the integration agenda whilst driving forward the prevention agenda.

9. Next Steps - The Board's Focus

- 9.1 The Board will focus on driving improvement against alcohol, as many participants of the development sessions were optimistic that the Board could achieve positive outcomes.

10. Next Steps - The Board's Place in the System's Governance and it's Sub-Groups

- 10.1 The Board's place in the governance of West Berkshire's health and wellbeing system is complex, made more complex by the emergence of Sustainability and Transformation Plans.
- 10.2 The Health and Wellbeing Steering Group completed a mapping exercise to identify the current arrangements (see paragraph 7.2 of the supporting information) and propose new arrangements for the Board's sub-groups. This will clear the way for the Board to be able to do work and not just approve reports. (more information is available at paragraph 7.4 to 7.24 of the supporting information).

11. Next Steps - Health and Wellbeing Board Strategy

- 11.1 The Health and Wellbeing Strategy has been updated to reflect the evolving ambition of the Board.
- 11.2 The strategy describes how Community Conversations will be used as the main mechanism for public engagement.

12. Next Steps - Health and Wellbeing Board Membership

- 12.1 The membership of the Board will be expanded to include system leaders from other local public sector organisations, namely:
- (1) A representative from Thames Valley Police
 - (2) A representative from Royal Berkshire Fire and Rescue Service
 - (3) A representative from one of the Housing Associations
 - (4) The Portfolio Holder for Community Resilience and Partnerships

13. Next Steps – The Mechanics

- 13.1 So that the Board itself can be accountable to its partners and the communities in West Berkshire, it will produce an annual report to summarise its activity and demonstrate delivery of the Health and Wellbeing Strategy.

14. Conclusion

- 14.1 The key recommendations from the peer challenge were:

- (1) Be clear about what you want from your HWB - is it the systems leader?

The work in the development sessions has revealed that members of the Board do want it to be the systems leader. They have deepened their understanding of what this means the Board will have to do. They have developed a shared narrative to unite behind and to help it to drive improvement. The Health and Wellbeing Strategy has been rewritten in the context of the Board's ambitions and will explain what outcomes are trying to be achieved.

- (2) Continue to hold difficult discussions about critical and important issues

The Board will continue to hold informal and private meetings to facilitate discussion on important issues, in addition to their public meetings. The Steering Group will manage the agendas of Board meetings with a view to enabling these discussions.

- (3) Generate pace and momentum to accelerate local improvement

The focus on action against alcohol related harm will target the Board's work and result in measurable improvement. By strengthening the Board's governance, it will ensure that there is a strong delivery arm to its work. By amending its membership, it will broaden its reach.

- (4) Strengthen performance management

The Steering Group will have a role to play in ensuring that the Board's sub-groups are delivering the Strategy. It will identify the information that the Board needs to see and will hold its sub-groups and partners to account for their work. The Steering Group will also review the Health and Social Care dashboard to ensure it is capturing the right information and aligned to the Health and Wellbeing Strategy.

(5) Develop and implement your communications and engagement strategy

The incorporation of the Building Communities Together Programme Board will ensure that Community Conversations form the basis of community engagement. These will be used to identify the priorities of residents to ensure that the messages coming from the Board.

15. Recommendations

In summary the recommendations arising from this report are:

- 15.1 That the Board agree the shared narrative in paragraph 4.2 (of the Supporting Information) as it's overarching ambition.
- 15.2 That the Board agree that its role is to be a system leader and understand that this role informs the way it approaches its work.
- 15.3 That in addition to the strategic priorities, the Board focuses on driving improvement on alcohol related harm.
- 15.4 That the Board restructure its governance and create the sub-groups as outlined in section 7 (of the Supporting Information).
- 15.5 That the Board alters its membership as outlined in paragraph 12.
- 15.6 That the Board commits to produce an annual report.
- 15.7 That the Board approves the terms of reference contained in Appendix C.

16. Appendices

- 16.1 Appendix A - Supporting Information
- 16.2 Appendix B – Peer Challenge Recommendations
- 16.3 Appendix C – Proposed Terms of Reference for the West Berkshire Health and Wellbeing Board