

HEALTH AND WELLBEING BOARD – 27 January 2016

Title of paper:	Health & Wellbeing Board Peer Challenge 2015 – findings and recommendations	
Director(s)/ Corporate Director(s):	Alison Michalska, Corporate Director, Adult & Childrens Services Richard Henderson, Interim Director of HR & Transformation Colin Monckton, Director of Commissioning, Policy and Insight Alison Challenger, Director of Public Health	Wards affected: All
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Other colleagues who have provided input:	Tim Spink, Nottingham Crime & Drugs Partnership	
Date of consultation with Portfolio Holder(s) (if relevant)	14 January 2015	
Relevant Council Plan Key Theme:		
Strategic Regeneration and Development		<input type="checkbox"/>
Schools		<input type="checkbox"/>
Planning and Housing		<input type="checkbox"/>
Community Services		<input type="checkbox"/>
Energy, Sustainability and Customer		<input type="checkbox"/>
Jobs, Growth and Transport		<input type="checkbox"/>
Adults, Health and Community Sector		<input checked="" type="checkbox"/>
Children, Early Intervention and Early Years		<input type="checkbox"/>
Leisure and Culture		<input type="checkbox"/>
Resources and Neighbourhood Regeneration		<input type="checkbox"/>
Relevant Health and Wellbeing Strategy Priority:		
Healthy Nottingham - Preventing alcohol misuse		<input checked="" type="checkbox"/>
Integrated care - Supporting older people		<input checked="" type="checkbox"/>
Early Intervention - Improving mental health		<input checked="" type="checkbox"/>
Changing culture and systems - Priority Families		<input checked="" type="checkbox"/>
Summary of issues (including benefits to citizens/service users and contribution to improving health & wellbeing and reducing inequalities):		
<p>This report highlights a number of key areas for improvement in how the Health & Wellbeing Board operates and works following a local peer challenge. By reviewing and revising the operation of the Board, it ensures that it is as effective and efficient as possible in leading the delivery of the current and subsequent Health and Wellbeing Strategy and the benefits that this will bring to all the city's citizens and service users.</p>		
Recommendation(s):		
1	To note the findings of the report and approve the proposed action plan (appendix 1).	
How will these recommendations champion mental health and wellbeing in line with the Health and Wellbeing Board aspiration to give equal value to mental health and physical health ('parity of esteem'):		

By improving the management and effectiveness of the Board, it will be better placed and able to lead and promote the improvement of the whole range of health and wellbeing issues faced across the city reflected in the Health & Wellbeing Strategy.

1. REASONS FOR RECOMMENDATIONS

- 1.1 By adopting the recommended actions of the report, the board will become more effective and efficient in leading and delivering the priorities and objectives set out in the Health and Wellbeing Strategy.

2. BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1 In February 2015, Nottingham City Council Chief Executive, Ian Curryer was part of the Local Government Association (LGA) peer challenge team for Hull City Council's own Health & Wellbeing Board (HWBB).

- 2.2 In order to contribute to the review of the Board and how it operates as effectively as possible in the run up to the introduction of a revised Health & Wellbeing Strategy in April 2016, he subsequently recommended to the HWBB chair, Councillor Alex Norris that a similar challenge be undertaken here and this was subsequently approved in October 2015.

2.3 The Challenge Team

The challenge would be based on the LGA's challenge mythology but it was felt that it should have a more 'local' approach rather than including 'peers' from organisations outside of Nottingham and its own HWBB. Therefore the final Challenge team, led by the City Council's Corporate Director for Adults and Children, comprised of a selection of senior City Council officers with either a direct or indirect role in health and wellbeing to provide critical challenge and enquiry on the issues being raised.

2.4 Questionnaire

In November 2015, an online questionnaire was sent to all 21 board members based on the LGA's own tried and tested questions based around five 'core' themes of:

- Vision, ambition and role of the HWBB
- System leadership and partnership working
- Ensuring delivery and impact
- Communications and Engagement
- Integration and system redesign.

Also included were questions on two other 'local' issues of:

- Involvement with the local third/voluntary sector and;
- Effectiveness of health and social care integration.

- 2.5 12 responses (57%) were received by the closing date.

2.6 Interviews

From the survey results, the Challenge team derived six core questions that would be further explored in a series of face-to-face interviews with Board members and other associated individuals who have a direct or indirect association with the HWBB. Therefore, the Challenge Team conducted a series of 18 interviews over 2 days in December 2015.

2.7 Other Review Work

The Challenge team also undertook a review of all associated local documentation, strategies, meeting minutes etc as well as a review of the findings etc from other peer challenges conducted in other local authorities, particularly from Hull City Council. Members of the team also observed at an HWB development session during the main challenge week in December. The team subsequently distilled their initial findings and fed this back to the HWBB on 18 December 2015.

2.8 Key Findings

Generally it was felt that health and wellbeing in the City was improving with good relationships across the Board membership with the right people round the table acting on a good evidence base. There was strong support and belief that the board has a strong role in the future and welcomed the review and the opportunity to change and move forward.

The key messages from the Challenge Team were:

- The Board was considered as being well positioned to lead health improvement and fulfils its minimum statutory requirements with strong membership, a collective drive, the right leaders around the table and good relationships in place. However, in such a climate of rapid change, the whole was not yet considered greater than the sum of the parts.
- The Board benefit from and base their work on a well-researched and evidenced Joint Strategic Needs Assessment (JSNA). However, clarity was needed to reinforce that the Board was responsible for the JSNA.
- The existing governance, accountability, roles and responsibilities are not as clear as they can be particularly between the Commissioning Executive Group (CEG), the Commissioning sub-committee and Health Scrutiny Panels and so are not effective.
- There is a need to build on the positive approach to consultation and engagement around the strategy refresh and the better use of information to communicate and engage more broadly, for example, the use of visually effective infographics.
- System leadership was not considered as mature and that sharing problems and risks across the Board needed some improvement.
- There was a need to clarify the roles of Board members, officers and citizens' representatives in order to provide further drive and challenge. It was felt that, occasionally, the Board tended to not have collective ownership or agreement on the issues it needed to tackle. Allied to this, the Challenge Team found that there was a lack of evidence that the three core elements of the Care Act 2012 for HWBBs were being focussed on i.e.
 - Improve health & wellbeing of people in our area
 - Reduce health inequalities
 - Promote the integration of services.

2.9 Key Areas for Improvement

- *Clarity of the purpose of the Board and its roles and responsibilities* – suggestions for how this could be improved include:
 - a nominated City Council director to lead the development and direction of the Board and its management

- Revising the support to the Board from the City's Constitutional Services
 - the development of a themed forward plan
 - more discussion on budget and funding
 - seek assurances that decisions made by organisations represented on the Board are in line with the Health & Wellbeing Strategy
 - induction for new Board members
 - improved interfaces with other partnership boards
- *Systems leadership* – in order to work together across the variety of organisations within the Board, an improvement is needed to its 'systems' leadership; its ability to 'lead without authority'.
- *Performance management* - e.g. delivery plans aligned to strategy, business planning processes, ownership and accountability
- *Better balance between qualitative and quantitative evidence* – often there is over reliance on quantitative data and information to show progress and this can be difficult to understand for 'non-experts' so it was felt that a certain amount of qualitative evidence be provided where possible such as case studies, citizens and workforce accounts etc.
- *Communication and engagement* – clearer and more accessible lines of communication to show what difference the Board is making. It was suggested that the Board use social media to 'create noise' about a key subject/issue to raise awareness and dialogue more widely than just within the organisations that are involved.
- *Inclusiveness* - particularly with 3rd sector but of all contributors such as housing and to look closely at how the Board reports issues, the language used and balance of clinical and social determinants and the use of plain English.
- *Link between Board and the organisations' workforce* – organisations from the largest employers in the city are represented on the Board and it was felt that ensuring the Board's work is communicated back to these workforces are key to reaching thousands of people and ensure the priorities and values of the board are integral to the work and culture to its organisation's employees as well as the wider community.

2.10 Proposed Action Plan

The Challenge Team recommended a series of short and medium term actions to address the key areas for improvement and these are set out in appendix 1.

3. OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

- 3.1 A peer challenge led by the LGA directly was considered but it was felt that a more local approach was more appropriate and would lead to better engagement and acceptance by the City's Board.

4. FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR MONEY/VAT)

- 4.1 Not applicable.

5. LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT ISSUES, AND LEGAL CRIME AND DISORDER ACT AND PROCUREMENT IMPLICATIONS)

5.1 Not applicable.

6. EQUALITY IMPACT ASSESSMENT

6.1 Has the equality impact of the proposals in this report been assessed?

No

An EIA is not required because the report does not contain proposals or financial decisions.

Yes

Attached as Appendix x, and due regard will be given to any implications identified in it.

7. LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

7.1 None.

8. PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

8.1 Nottingham City's Joint Health and Wellbeing Strategy 2013-2016.