Summary

In January 2017 members of the Board undertook a workshop on the future direction and vision of the Board, and how it can deliver better health and wellbeing outcomes for the residents of Barking and Dagenham.

This report captures the outcomes of that workshop, and reflects on discussions held on the future practice, direction and vision of the Board. It outlines how the Board will seek in the future to prioritise its time and resources on the most substantive and important issues, how it will align and engage with wider Barking and Dagenham, Havering and Redbridge (BHR) integration work, and how it will seek further and more effective integration and collaboration.

Recommendation(s)

The Health and Wellbeing Board is recommended to note and discuss the content of this report.

Reason(s)

In order for the Board to fulfil its responsibilities of encouraging health and social care integration, and delivering improved outcomes and reduced inequalities for the residents of Barking and Dagenham, it is vital that the focus, operation and direction of the Board be evaluated and improved as necessary.

1. Introduction and Background

1.1 The remit of the Health and Wellbeing Board, established on 1 April 2013 under the provisions of the Health and Social Care Act 2012, is to strengthen working relationships between health and social care, and encourage the development of more integrated commissioning of services. Through its work the Board seeks to improve health and wellbeing outcomes, and reduce health inequalities, of local people.
1.2 With the population of Barking and Dagenham growing rapidly – expected to reach 275,000 by 2037 – and demand for health and social care services increasing even faster, with a wide range of health inequalities continuing to impact residents, and with budgets facing the pressures of this demand in conjunction with the last 7 years of austerity, the Board’s responsibility to encourage substantive integration and innovation has never been so important and urgent.

1.3 It is, therefore, essential to ensure that the Board is using its time and resources in the most efficient and effective way possible, targeting innovative and important proposals and challenges, in order to best serve the residents of Barking and Dagenham.

2. January 2017 workshop

2.1 In January 2017 members of the Board took part in a workshop on the current state and future of the Health and Wellbeing Board, and how it can best serve its aims and purpose. This workshop generated a number of outcomes and perspectives:

- Momentum is key. It was agreed that the Board needs to maintain a strong pace behind the integration work being sought, in order to meet the urgent demand we face.

- It was agreed that the members of the Board need to ensure all resources and avenues for commissioning and integration are being utilised, and that the Board is placed at the centre of co-ordinating the impact of system-wide initiatives (for example the BHR programmes and the STP) on Barking & Dagenham. The Council’s role as the focal point for a community leadership for Barking & Dagenham needs to be expressed through the Board and through these discussions.

- The Board should devise and agree a narrative on the history of health and social care integration in Barking and Dagenham. This should prove the long-standing commitment to integration, the ‘ups and downs’ of what has been done before, what is currently being undertaken and the lessons learned so far. In addition, this narrative could be added to with a commonly agreed vision for the future of health and social care integration in the borough, outlining the principles of effective collaboration and integration we have learned over previous and current undertakings.

- We have a rich history of health and social care integration, and in many ways are currently pioneering the field. Yet the borough does not receive the praise, attention and engagement it deserves for this work, and partners remain overly modest with regard to integration achievements. This modesty holds back further progress, and the Board must foster a positive, optimistic attitude which both encourages future work, and informs others of our achievements.

3. Reframing the operation of the Board

3.1 Since the workshop in January 2017, discussions have continued about how these findings can inform changes to the working of the Health and Wellbeing Board. In
summary, there is common agreement that the best way forward for the Board would be for its business to be conducted with:

- Fewer, more substantive items and less routine operational business;
- A stronger emphasis on ensuring a place for discussion about system interventions, principally the BHR Integrated Care Partnership and the East London Health & Care Partnership (the Sustainability & Transformation Plan);
- Consideration of the timing of meetings;
- A refreshed substructure for the Board

Proposals for the operation of the Board

3.2 First and foremost is that, going forward, those items brought to the Board are fewer but more substantive in terms of impact. With shorter agendas, focusing on key issues or proposals, the Board will be freed to delve deeper into discussion and debate, developing a more focused and effective approach. This will mean that some items, such as some procurement contracts, are likely to be addressed through other Council member-level forums, principally Cabinet, with other regular items being circulated to members for informal consideration outside of the Board. Consequently, a review is being undertaken of the Board’s forward plan for the next year.

3.3 It is important that the Board’s agenda is aligned with that of the wider BHR integration. As joint commissioning and further integration are approached, the Board will dedicate more resource to investigating the relevant topics and developing shared stances. This will strengthen the Board’s position within the region, and allow it to speak with a coherent, unified voice.

3.4 Members have also raised the issue of the timing of its meetings. Aware of the schedules of members, this is an issue which is being considered in the changing approach of the Board’s operation.

3.5 The governance of the Board and its sub-structure is being further developed to improve its effectiveness and communication. This will reflect the new form and responsibilities of the Integrated Care Partnership, as well as reforming and strengthening of the Children’s Partnership (formerly the Children and Maternity Group). It is vital that the Board is supported by an effective sub-structure with significant responsibility, so as to allow the Board itself to take a strategic overview and direct the health and social care sector in the borough. The current refreshed position is attached at Appendix A.

Development of a stronger narrative for integration in Barking & Dagenham

3.6 As decided at the January 2017 workshop, a narrative is being developed, and will be presented to the September 2017 Board, on the history and theory of health and social care integration in Barking and Dagenham. As well as detailing previous and current undertakings, this report will outline the lessons learned from these projects, and how they inform our understanding of integration moving forward. This will act
as a guide to future collaboration, and a means of evidencing the achievements made thus far.
4. Conclusion

4.1 It is important that members discuss these ideas, and share any other thoughts on how the Board can take the most effective approach possible to achieve its aims and deliver for residents.

4.2 A report will be brought to the September 2017 Board, further outlining the changing direction of the Board, presenting the integration narrative described above, and reflecting any additional proposals or challenges identified.

5. Mandatory Implications

Joint Strategic Needs Assessment

5.1 The remit of the Board is to encourage integration of health and social care and deliver improved health outcomes and reduced inequalities for the residents of Barking and Dagenham, including those identified in the 2016 JSNA. Therefore, working to maximise the efficiency, effectiveness and direction of the Board – as this report does – aims to improve the Board’s ability to react to the findings of the JSNA.

Health and Wellbeing Strategy

5.2 The Health and Wellbeing Strategy includes in its key themes prevention, improvement and integration of services, care and support, protection and safeguarding. A more effective Health and Wellbeing Board would be able to forward each of these priorities, and in particular prevention, and improvement and integration of services, as more resource and time may be focused on these key issues.

Integration

5.3 The proposed new direction of the Board will allow it to dedicate greater resources and time to substantive topics of health and social care integration; a central purpose of the Board.

Financial Implications (completed by: Katherine Heffernan, Group Manager – Services Finance)

5.4 There are no financial implications directly arising out of this report.

Legal Implications (completed by Dr. Paul Field, Senior Corporate Governance Lawyer)

5.5 The Health and Social Care Act (2012) conferred the responsibility for health improvement to local authorities. In addition as a best value authority under the Local Government Act 1999 there is a duty on the Council to secure continuous improvement. The Health and Well-Being Board terms of reference establish its function to ensure that the providers of health and social care services work in their delivery in an integrated manner.
5.6 As the report explains the key trust of the Boards statutory responsibility is to secure continuous improvement this is overall a strategic role and the implication is that the boards business should be primarily focused to leadership by setting direction and promoting change. It therefore follows that with finite resources the time of the Board to consider items is inevitably precious and those matters which can be delegated to officers should be actively considered such as for example procurement. The Board can still monitor the work through periodic reporting by the appropriate directors.

**Public Background Papers Used in the Preparation of the Report:** None

**List of Appendices:**

- **Appendix A:** Health and Wellbeing Board governance sub-structure