

Overview and Scrutiny Committee

17 April 2024

Title: London Borough of Barking and Dagenham Local Government Association led Public Health Peer Review	
Report of the Cabinet Member for Adult Social Care and Health Integration	
Open Report	For Information
Wards Affected: All	Key Decision: No
Report Author: Matthew Cole Director of Public Health	Contact Details: E-mail: matthew.cole@lbbd.gov.uk
Accountable Director: Matthew Cole Director of Public Health	
Accountable Strategic Leadership Director: Elaine Allegretti Strategic Director Childrens & Adults	
Summary	
<p>In February 2024 the Local Government Association conducted a Public Health peer challenge at Barking and Dagenham. A peer challenge is a tried, tested and trusted tool to support improvement. It involved a small team of local government peers spending time at the council and with partners to provide challenge and share learning. The main purpose of the challenge was to focus on the vision set out in our Joint Local Health & Wellbeing Strategy 2023-28 that by 2028 residents will have improved physical and mental health and wellbeing, with a reduced health inequalities gap between those living elsewhere.</p> <p>The report found widespread acknowledgement of the leadership provided by the council and partners in creating the Committees in Common and wider operating framework for place – different to the rest of North East London. A governance platform based on openness to learning and innovation demonstrated through the energy and enthusiasm of everyone they met.</p> <p>They reported examples of partnership working that are innovative, exceptional and game changing, and described the council as demonstrating a strong commitment to health that is beginning to shape core services. Including many examples of using community energy and creativity with a determination to make the most of mobilising community strengths.</p> <p>The peer team findings and recommendations can be found in Appendix 1.</p>	
Recommendation(s)	
<p>The Overview and Scrutiny Committee is asked to note the feedback of the Local Government Association Peer Team and their eight recommendations.</p>	

Reason(s)

The time is right for us to pause and reflect with the Peer Challenge Team on where we are performing well and importantly identify ways in which we can embed improvements.

The Council's Specialist Public Health team has evolved over the last 10 years and is currently focused on delivering the expectations of the new 'place-based partnership arrangements' between the Council, NHS, and voluntary sector partners within the North East London Integrated Care System (ICS), reflecting the integral system leadership role the Team plays in multidisciplinary working across place-based partners.

By utilising peer challenges, public health is shining a light on how effectively it operates both within the Council and as part of the ICS place-based arrangements. With the growing impetus on prevention and integration, it is essential that public health is well-placed to drive the 'health in all policies' approach and to ensure that improving health and wellbeing, and tackling health inequalities, is everyone's business.

The Peer Challenge Team assessed our progress towards delivering effective, lasting health and wellbeing improvements.

1. The Local Government Association (LGA) public health peer review offer

- 1.1 The LGA's offer to support sector led improvement provides a range of tools to help councils further strengthen local accountability and explore how effectively they are delivering services. Peer reviews are part of this offer. They provide a robust and effective improvement tool managed and delivered by the sector, for the sector. Peers are at the heart of the peer review process and provide a 'practitioner perspective' and 'critical friend' challenge.
- 1.2 The public health peer review involves a team of peers spending up to four days in a local place to identify strengths and areas for improvement. It is not a part of assurance, regulation, or inspection. It is a voluntary undertaking aimed at bringing council and place/system partners together in a safe space to consider strengths and areas for improvement. It provides a rare and valuable 'time out' for reflection, take stock and plan for the future and is an independent, objective and purposeful process focused on what can change within that council/place/system.

2. The focus for the peer review at London Borough of Barking and Dagenham.

2.1 The objectives of the Peer Review were to:

- Assess how the council and its partners are working together to best deliver effective public health outcomes for residents.
- Inform the direction of the council in delivering an ambitious, proactive and effective strategy and implementation plan to improve the health of residents.
- Identify strengths, challenges and solutions to any locally identified challenges.
- Review and identify areas of opportunity to best utilise specialist public health capacity and resources, including any barriers to overcome and areas where time could be better spent.

2.2 The peer challenge team will look at the following areas:

Vision and strategy

- To what degree is the council and its partners having an impact on the health and wellbeing outcomes of residents?
- How effective is public health across Barking and Dagenham in monitoring, measuring and improving outcomes for population health?

Use of resources

- Ways in which the public health grant can be maximised to deliver statutory requirements and impact public health outcomes and priorities.
- What opportunities are there to maximise the contribution of public health expertise e.g., within the council, place-based partnerships and at system level?
- The quality of public health commissioning and effectiveness of current contracts.

Partnership working

- How effective is engagement with key partners, e.g., Committees in Common (Health & Wellbeing Board/Integrated Care Board subcommittee), NHS North East London, and others to influence and align key strategies and improve outcomes?
- Where is delivery working well, and where/how can this be improved?
- What work remains outstanding and requires to be progressed/ improved in the short, medium and long term in order to realise the potential of public health within Council and the Place arrangements?

3. The approach

3.1 A team of LGA trained peers from across local government and health will spend up to four days with council officers, elected members and key partners 'holding the mirror up' to opportunities and challenges. The review team will provide feedback and recommendations at the end of the peer challenge by identifying strengths and highlighting areas for improvement.

3.2 The peer review team consisted of:

- Lead Chief Executive Peer: Paul Najsarek
- Elected Member Peer: Jonathan McShane, former Cabinet Member for Health, Social Care and Devolution
- Director of Public Health Peer: Dr Anita Parkin
- NHS Peer: Marcus Warnes
- Public Health Consultant: Angela Baker, Coventry City Council
- VCSE Peer: Colin Maclean
- Peer Review Manager: Kay Burkett, Local Government Association
- Peer Review Manager (Shadow): Marnie Ridley, Adviser (Public Health), Local Government Association

4. Timescales

4.1 Scoping, planning and preparation will begin in November 2023 with pre-visit discussions taking place during December 2023-January 2024. The peer review team were onsite at London Borough of Barking and Dagenham for three days from Tuesday 27 February until Thursday 29 February 2024.

5. Feedback from the peer review and follow up activity

5.1 Feedback from the peer team took place on 29 February at an informal meeting of the Barking and Dagenham Committees in Common.

5.2 Headline findings:

- Council and partners open to learning and innovation demonstrated through the energy and enthusiasm of everyone we met.
- Widespread acknowledgement of the leadership provided by the Council and partners in creating the Committees in Common and wider operating framework for place.
- The partnership between the Council and ICB is moving in the right direction to:
 - offer traction for how health works at a local level - looking beyond health services:
 - harness the shared vision for population health and passion for reducing inequalities.
 - be proactive to the changing population in the Borough.
- Many examples of using community energy and creativity with a determination to make the most of mobilising community strengths.
- Widespread recognition of the contribution of the Director of Public Health and Public Health Team in approach and expertise - with clear opportunities for further engagement to inform need and impact e.g., regeneration, growth, and the response to changing communities Headline Findings.
- There is an opportunity for intelligence and data analysts across the Council and partners to further align to support population modelling and commissioning for changing demographics.
- Large number of commitments and priorities making collective focus difficult with action planning, action and accountability for delivery needing development.
- The Council recognises the positive contribution Community Solutions has made and is now moving to the next stage around the locality model with a stronger focus on outcomes and prevention.
- Opportunity to further develop public health impact across the Council e.g. housing and growth.
- Further work to do on joint commissioning, pooled budgets and aligning teams.
- The hard part is still ahead.
- You have established stronger foundations it is now important to move at pace in achieving outcome.

5.3 Recommendations:

- The strong foundations of governance, relationships and place leadership have been built – they give you a platform to move at pace to action and impact.
- Take the opportunity for Public Health to help support cross-Council work on the wider determinants e.g., growth and housing.
- Continue to reflect on executive place leadership arrangements as you develop.

- Rationalise strategies, commitments and priorities into one smart Barking and Dagenham prioritised delivery plan
- In response to this - one priority that could help in modelling action planning and joint working is tackling childhood obesity together.
 - Agree your model of joint commissioning including procurement considering where Public Health can best add value in needs analysis and evaluation.
 - Continue to pull together a single team for data intelligence and modelling demand across council and partners.
 - Design and embed a joint vision for integrated locality working.

6. Next Steps

6.1 An action planning process is being undertaken to present the next steps to the Barking and Dagenham Committees in Common at their meeting on 11 June 2024 in order to maintain momentum to take forward the Peer Review findings.

6.2 Follow up support is available to take forward recommendations and embed the findings from the peer review. The Public Health and Prevention Improvement Support offer can be found here: [Public health and prevention | Local Government Association](#)

7. Financial Implications

Implications completed by: Amar Barot, Head of Finance (People)

7.1 There are no direct financial implications arising from this report.

8. Legal Implications

Implications completed by: **Dr Paul Feild Principal Solicitor Standards and Governance**

8.1 There is no statutory duty to respond to a LGA Peer Review as the Review itself is on a non-statutory footing. Nevertheless, the practice does dovetail with the 'Best Value Duty' under section 3 of the Local Government Act 1999, and such processes are good practice to secure continuous improvement. Furthermore, it is gratifying to hear from third party experts that the innovative 'Committees in Common' are securing improvements and joined-up partnership working.

9. Health issues

9.1 The peer review findings validate our current arrangements and gives direction to the next steps to ensure the collective efforts of all our partners are focused on delivering the shared outcomes in our Joint Local Health & Wellbeing Strategy 2023-28 and closing the gap for those with the poorest outcomes.

9.2 A key message to act on is that services on their own will not improve our agreed public health outcomes or manage health and social care demand without a radical upgrade in prevention that addresses the wider social determinants of health. Central to realising the opportunities of 'Place Leadership' is the need to change the co-production relationship between our residents and the council as well as between

patients and the NHS to determine the way we provide services where the best outcomes can be delivered at the right cost.

Public Background Papers Used in the Preparation of the Report:

[System-wide care and health peer challenge](#) | [Local Government Association](#)

List of appendices:

Appendix 1: LB Barking and Dagenham Public Health Peer Review Feedback to the Committees in Common 29 February 2024

Appendix 2: Glossary of Terms