

## Health & Well-being Board – 8<sup>th</sup> July 2015

### Governance Proposals

#### Recommendations

That the Health and Well-being Board;

1. Supports adopting the form of governance at set out in paragraph 2 with membership of the HWB Board as set out in Appendix 1 and membership of the HWB Executive Team as set out in Appendix 2.
2. Agrees the purpose of the Board as set out in paragraph 3.4
3. Adopts the principles of working for the HWB Board as set out in paragraph 3.5
4. Adopts the sub-structure proposals as set out in paragraph 4 and Appendix 3
5. Approves the action plan set out in Appendix 4 which addresses the remaining recommendations from the Peer Challenge as identified in paragraph 5;

#### 1. Background

- 1.1 The LGA Health and Well-being Peer Challenge made a number of recommendations covering leadership, governance, strategy and planning and operational matters. The HWB workshop held on 20<sup>th</sup> May 2015 provided an opportunity for the Board to take stock and start thinking about how it would wish to take forward the peer challenge recommendations.
- 1.2 This report brings together the outcomes of the HWB workshop with a particular focus on the following governance related recommendations from the Peer Challenge;
  - A clear definition of the purpose of the HWBB
  - Review the membership of the Board, with Health to take Deputy Chair
  - Define and collectively agree:
    - Who sits around the table e.g., providers, 3<sup>rd</sup> sector
    - Roles of individual Board members:
    - Responsibilities
  - Clarify/simplify the current complex structure beneath the HWBB and interrelations with the Adult Social Care and Health Overview and Scrutiny Committee.
- 1.3 The report also sets out the further areas identified by the Peer Challenge for the Board to take forward and proposes a draft action plan that the Board may wish to consider adopting.

## 2. Membership of the Board and Role of Board Members

- 2.1 The workshop presented two models for Board membership which were discussed in the group sessions. Model A which involved a larger inclusive Board was supported by a significant majority of attendees. In this model the Board would have a public facing, strategic focus, receiving agenda items which were clear about the added value and the outcomes that the Board could deliver collectively.
- 2.2 Where specific feedback was received about who should sit on the Board, most supported the inclusion of providers on the Board at a strategic level (but not involved in commissioning decisions), recognising that there may be conflict situations when providers would need to leave the room and not take part in decision making. The Board and its members are required to operate under the County Council's Code of Conduct.
- 2.3 Representation on the Board under this model would be at Chairman/ Elected Member/ Non Executive level. The expectation is that Board members would;
- Act as 'systems leaders',
  - Act as ambassadors for the HWB strategy, taking back accountability for delivery of the strategy to their organisations
  - Act collegiately in support of delivery of the HWB strategy
  - Adopt constructive and positive working relationships and behaviours
- 2.4 Option A also proposed that a smaller 'executive team' comprising Chief Executives and Senior Officers (who have delegated decision making powers from their own organisations). The executive team would form part of the Board's formal governance arrangements and would drive forward the HWB agenda and ensure a co-ordinated and cohesive approach to delivery. Recognising the extent of the potential coverage of 'health and well-being' and its impact on Warwickshire residents, the executive team would play a key role in focusing efforts to areas where collectively partners can make a tangible difference and targeting resources and efforts to HWB priorities as drawn from the HWB strategy. This in turn would help to focus the agendas of the Board and outcomes that the Board needs to deliver.
- 2.5 It is proposed that the current Integration Executive Board is reshaped into the new HWB Executive Team with its terms of reference reviewed and amended accordingly to encompass its wider brief. It is recognised however that there may be certain issues currently being pursued by the Integration Executive which won't necessarily require attendance of all partners on the HWB Executive Team. The County Council's Strategic Director for Resources will continue to work with the Board (and its senior responsible officer – see paragraph 2.6 below) to refine and implement the operational arrangements required.
- 2.6 For this proposed model to work effectively and have a clear line of accountability back to the Board, it is proposed that the County Council's Strategic Director of People Group takes on the role of 'senior responsible officer' with responsibility for delivery of the HWB outcomes and for ensuring that effective operational, delivery and performance management arrangements are in place.
- 2.7 It is proposed that the Board supports adopting the Model A form of governance with membership of the HWB Board as set out in **Appendix 1** and membership of the HWB Executive Team as set out in **Appendix 2**.

### 3. Purpose of HWBB

- 3.1 The workshop asked delegates to review the purpose of the HWBB, with a focus on what they felt the Board does well and areas where it could do better. Areas where delegates feel the Board is performing well included;
- Building relationships between partners
  - Giving partners a better understanding of the wider health and well-being landscape
  - Enthusiasm among partners and a willingness to engage to make improvements
  - Buy-in to the strategy by members and a real appetite for improvement
- 3.2 Areas where delegates felt that the Board could do better included;
- Be more transparent and improve engagement with the public
  - Clarify the infrastructure that sits under the HWBB
  - Focus on strategy and not get distracted by immediate delivery issues such as performance of acute hospital providers
  - Ensure strategy reflects wider health and well-being landscape – not just health and social care
  - Be clearer about how the HWB strategy is to be delivered and how partners are held to account to ensure delivery
  - Improve communications in respect of action that has been taken
  - Better agenda planning processes
  - Provide more evidence of the impact the HWBB's actions are having on health and well-being.
- 3.3 The governance model proposed and the supporting recommendations in this paper attempt to address a number of the areas identified in paragraph 3.2. For example: adopting Model A with sufficiently robust agenda management should enable the Board to have a clear focus on strategy; and the greater clarity around the HWB related infrastructure (see paragraph 4 below) should enable greater line of sight for those elements of the strategy which are not purely health and social care related and in turn will provide greater clarity around how the different elements of the strategy are delivered.
- 3.4 Taking into account the feedback from the workshop it is proposed that the purpose of the HWB Board is as set out below with a review of its purpose taking place within 12 months of operation;
- To provide strategic direction and develop shared outcomes for improving health and well-being in Warwickshire by bringing together relevant partners whose functions have an impact on health and well-being
  - To create collective ownership and accountability among partners for the delivery of shared health and well-being outcomes to Warwickshire residents
  - To promote positive health and well-being among the Warwickshire public and encourage integration between social care and health
  - To undertake the specific roles required of it under statute and best practice guidance (eg; prepare and publish JSNA and HWB Strategy, approve the BCF quarterly and annual reports, approve Section.75 agreements, act as a statutory consultee on a range of matters related to the CCGs, undertake a needs assessment for pharmaceutical services)
  - To have oversight of commissioning activity which supports the delivery of the HWB strategy and to encourage a co-ordinated approach to commissioning activity across partner organisations

- 3.5 For this model to work, Board members and partner agencies will need to sign up to the following key principles;
- To maintain a strategic focus, the HWBB will meet only 3 or 4 times a year
  - The HWBB will consider items they have a legal obligation to consider and anything of strategic importance as identified by the Executive Team
  - Agenda management for the HWB will be tight – non statutory items will only be considered by the HWBB if it can be demonstrated that the HWBB can add value in that area – ie that the collective efforts of the HWBB partners and the decisions of the HWBB can make a difference to outcomes
  - All reports going to the HWBB will be clear about what is expected of the Board and what decisions and outcomes are being sought
  - The relationship with the Executive Team will involve upward and downward referrals. In other words, the HWBB can refer appropriate items to the Executive Team and similarly, the Executive Team can refer matters to the HWBB. If the Executive Team is convened as a sub-committee more formal delegations can be considered.

#### 4 Sub-structure of HWBB

- 4.1 The workshop feedback acknowledged that there is a lot of confusion around how the HWBB interacts with other groups and that there is a lack of clarity around which boards and programmes have a reporting line or a link back to the HWB Board. This was noted at both the immediate sub-structure level and also at the delivery group level where there is a large number of groups working on outcomes relevant to the HWB strategy which appear to be 'free floating' and therefore could give rise to duplication of efforts.
- 4.2 A proposal for the sub-structure is attached at **Appendix 3**. At the sub-structure level it is proposed that the HWB Board recognises that the groups set out below are connected to delivery of the HWB outcomes and that to effectively deliver the strategy there needs to be linkages and alignment between them and the HWBB, with the Executive Team pulling together the various threads and ensuring there is a cohesiveness about the work being carried out under the 'health and well-being' banner, linked back to the HWB strategy and the various partner agencies who collectively deliver against that strategy. These groups are:
- Better Together Programme
  - 0-5s group
  - MASH
  - Warwickshire Community Safety Partnership (Safer Warwickshire Partnership Board)
  - Infrastructure Board
  - Skills for Employment Board
  - Children's and Adults Commissioning Boards
- 4.3 Under this model, the expectation is not that each group is necessarily directly accountable back to the HWB for all the activity that particular group is undertaking. Rather that the groups are able to provide the assurance to the Executive Team and to the Board that the elements of the HWB strategy which fall within their remit are being addressed and delivered. This would enable the Executive Team and the Board to have a strategic overview as to how the elements of the HWB strategy are being delivered and could play an active role in shaping action on the ground. It would also ensure that the right linkages and alignments are made and there is a co-ordinated approach across partners.

- 4.4 This model, coupled with the Peer Challenge recommendations, would require a closer look at the HWB outcomes as set out in the HWB strategy. Clarity would be needed as to which outcomes are a strategic priority for the Board (ie where can the Board make greatest impact), where responsibility for delivery of those outcomes best sits (ie which themed work stream/group at the sub structure level) and what assurances and reporting back arrangements are required. It is recommended that this piece of work is taken forward by the newly formed Executive Team, under the direction of the senior responsible officer, with a report back to the autumn HWBB. This should help to distinguish between 'business as usual' activity and priority outcomes for the HWB Board as a collective.

## 5 Conclusion

- 5.1 This report addresses the main governance related recommendations emerging from the HWB Peer Challenge and asks the HWB Board to support the proposed new governance arrangements as set out in this report.
- 5.2 The Peer Challenge also made recommendations in a number of other areas, some of which are highlighted in this report. The key recommendations which require further work and discussion are set out below in summary;
- 5.2.1 The development of a clear action plan for delivery of the HWB strategy and ownership for delivery of its outcomes. The way forward for this is referenced in paragraph 4.4 above
- 5.2.2 The interrelationship between the HWB Board and scrutiny arrangements. It is proposed that this work is led by the County Council's Head of Law & Governance as a follow on from the governance work.
- 5.2.3 Securing a Deputy Chair of the Board from a health partner body (eg CCG)
- 5.2.4 The provision of structured officer support for Board development, forward planning of business for the Board and performance management – it is proposed that the County Council's Strategic Director of People Group as 'senior responsible officer' formulate appropriate working arrangements for this.
- 5.2.5 The continued development of the Board as a collective, building relationships, acting in support of Board objectives and the adoption of a system leadership approach – it is proposed that the series of workshops planned for the Board incorporate some sessions to focus on these issues, with other workshops focused on themes relevant to the different delivery boards. These would not be public meetings. Identification of relevant workshop topics would be overseen by the Executive Team. The Board could also consider a wider development programme for officers involved in delivery to embed the systems leadership approach at all levels. This will form part of the cultural theme of the action plan.
- 5.2.6 Customer, patient, service user accountability and wider stakeholder engagement – the recommendations of the peer challenge around this area were quite specific around how the Board can raise its profile, its approach to digital media, whether it should have its own identity, communication of success to the wider community and engagement with a wider range of stakeholders. The suggestion of a wider annual stakeholder engagement

event was largely welcomed at the workshop. It is proposed that this strand of work is developed by the officer support structure identified at 5.2.4 above under the direction of the senior responsible officer.

5.3 The above items have been incorporated into a draft Action Plan which is set out at **Appendix 4**. Taking into account the feedback at the workshop, the plan also includes an action focused around review and rationalising arrangements at the delivery group level, which includes various free standing boards and groups, to ensure that the right linkages are made across the whole of the health and well-being landscape. The Board is invited to approve the action plan.

## 6. Background Papers

LGA Health & Well-being Peer Challenge Feedback Letter  
Health and Well-being Workshop Feedback

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## Appendix 1

### Proposed Membership of HWB Board – Non executive, member, chairman level

<b>Member</b>	<b>Organisation / Number</b>
Director of Public Health	WCC (statutory requirement)
Director of Children's and Adults Services	WCC (statutory requirement)
County Council elected members	4 x WCC elected members
District and Borough Council elected members	5 x DC/BC Portfolio Holders (one representative from each area)
Chair of Health Watch Warwickshire	Health Watch (statutory requirement)
CCGs (at chair/non exec level)	3 x CCGs (one representative from each area)
NHS England representative	NHS England (statutory requirement for certain elements)
Providers (at chair/non exec level)	4 x Provider representatives; South Warwickshire Foundation Trust, University Hospitals Coventry and Warwickshire, George Eliot Hospital, Coventry and Warwickshire Partnership Trust
Police and Crime Commissioner	Police and Crime Commissioner
<b>Total</b>	<b>21</b>

## Appendix 2

### Membership of HWB Executive Team

<b>Member</b>	<b>Organisation / Number</b>
Director of Public Health	WCC
Director of Children's and Adults Services	WCC
Director for Communities	WCC
District and Borough Council Chief Executives	3 x DC/BC Chief Executive Representatives (one representative from each CCG area)
Chief Executive of Health Watch Warwickshire	Health Watch
CCGs Chief Officers	3 x CCGs (one representative from each area)
Providers – Chief Executives / Chief Officers	4 x Provider representatives; South Warwickshire Foundation Trust, University Hospitals Coventry and Warwickshire, George Eliot Hospital, Coventry and Warwickshire Partnership Trust
Chief Constable	Chief Constable of Warwickshire Police
WCAVA – Chief Executive	WCAVA (Third Sector representative)
<b>Total</b>	<b>16</b>

## HWBB sub structure proposals

### Appendix 3



Vs1.2

**Appendix 4**  
**Draft Action Plan for consideration at the HWB Board Meeting on 8<sup>th</sup> July**

<b>HEALTH &amp; WELL-BEING PEER CHALLENGE ACTION PLAN</b>				
THEME	PEER CHALLENGE RECOMMENDATION	PLANNED ACTIVITIES	PROGRESS TO DATE	LEADS
<b>DELIVERY OF HWB STRATEGY</b>	Develop shared ownership of the Health & Wellbeing Board agenda	Phase 2 of the governance review includes work for the Board to identify key priorities from the HWB Strategy and have clarity about which group at the sub-structure level had lead responsibility for their delivery. Together with the culture actions below, this will start to address shared ownership of the HWBB agenda	The need for the Board to undertake this work has been flagged in the Governance Report being considered on 8th July 2015. The Senior Responsible Officer will lead on this work. It will be key that the Board engages in this work (possibly through workshop) to ensure that shared ownership secured. The cultural work stream (see below) will also have an impact	John Dixon
	Develop a joint implementation plan for use by all partners	Outcomes from the above work would be incorporated into the work programmes of the sub-structure level groups / boards	The development of the joint implementation plan will be part of the above work	John Dixon
	Clear performance management processes to develop	Existing performance management arrangements and processes to be reviewed as part of the above work	Performance management arrangements to be clarified through the above work	John Dixon
<b>BOARD MEMBERSHIP</b>	A Health partner should be considered in the role of Deputy Chair	CCGs to confirm nomination for Vice Chair by 30th September 2015	CCGs supportive of the proposal to nominate a Vice Chair. Discussions have taken place within the CCGs and dialogue is continuing to enable confirmation of a CCG representative as Vice Chair in the early autumn	CCGs
<b>BOARD CULTURE, DEVELOPMENT &amp; OPERATION</b>	More focus of developing a culture of 'we' and 'us', moving towards acceptance that all partners are equal and should take ownership, agreement and understanding of each organisation's role in the delivery of outcomes	Executive Team to review plan for workshops to provide space for Board to progress these cultural themes. Board to consider thematic workshops (based around delivery work streams) and also workshops which build relationships and promote the systems leadership approach	Workshop dates confirmed. Focus and content to be considered by Executive Team	Executive Team
	Review approach to digital media, including up to date information on webpages	Executive Team to identify appropriate resource to take forward this piece of work, including development of Comms Strategy	To be considered by Executive Team - potential programme of work for officer support team	Executive Team
	Consider whether the HWBB needs its own identity and how its success is communicated to the wider community	Executive Team to consider further, in particular to review the proposal to hold an annual stakeholder engagement event	To be considered by Executive Team - potential programme of work for officer support team	Executive Team
	Develop clear and distinct support for the Chair (Board)	That the Senior Responsible Officer identifies appropriate officer support for Board development, forward planning of business and performance management monitoring	To be determined by Senior Responsible Officer	John Dixon
<b>INTERRELATIONS WITH OTHERS</b>	Clarify the Board's interrelations with WCC's Adult Social Care and Health Overview and Scrutiny Committee	Review to be undertaken led by WCC reporting back to the Board in the autumn	Sarah Duxbury to be the lead officer taking this work forward as a follow on to the governance work already completed.	Sarah Duxbury
	Clarify and potentially simplify the complex structure beneath the Board	Review and rationalisation of the various operational delivery boards that contribute to delivery of the HWB outcomes and feed into the HWBB. These include a number of groups focused on single issues.	The report to the HWB Board on 8th July makes proposals to simplify the boards and groups which operate at the sub structure level (ie immediately below the Board). A follow up piece of work will be to review the boards and groups which operate at the delivery/ operational level and are aligned with delivery of HWB outcomes	Sarah Duxbury