

HEALTH AND WELL BEING BOARD UPDATE AND WORK PROGRAMME – 18 OCTOBER 2011

A PURPOSE

This report:

- Provides an update on the current position with the development of the Health and Well Being Board, including the revised Development Framework
- Proposes an outline draft Work Plan for the next six months which picks up the key development themes agreed by the Board
- Sets out the next steps that will be addressed over the coming weeks.

B RECOMMENDATION

The Board is asked to:

- a) Note the update and next steps and agree any further work that the Board would like to see
- b) Review and amend as necessary the Work Plan

C SUPPORTING INFORMATION

Update

- 1 Key developments for the Health and Well Being Board are highlighted below.

Board Development

- 2 Following the appointment of the Institute of Local Government (Inlogov) to support the Board, Catherine State has undertaken interviews with Board members to seek their views on the priorities for development. In summary:

- *There is a high level of commitment to the Board*
- *Some people feel there is still a need to discuss what we are trying to achieve, to be clear where we can add value and to agree the difference that we will make*
- *Others feel that we need to be more decisive and to “learn by doing”*
- *There is a consensus, however, that the HWBB needs to develop at the same pace as the Clinical Commissioning Group*

Membership of the Board

- 3 Membership of the Board will be kept as currently agreed for the time being, but will be enhanced by additional Councillor and GP representation later in

the year. In addition, others will be invited to attend the Board for specific items.

Board Development Framework

- 4 The discussion paper considered by the Board in April and June 2011 has been updated to reflect both local discussions (including the second workshop on 16 July 2011) and the Government's recent statement on the role of HWBBs. This will now be used a Framework for the Board's development and work planning and will be reviewed from time to time by the Board.
- 5 A reminder that the top ten key issues for the Board are:

KEY ISSUE	OUTCOMES
1. Defining Health and Well Being	<ul style="list-style-type: none"> ▪ Shared understanding of what "health and well being" means ▪ Shared vision of what we want to achieve for Herefordshire through the new arrangements ▪ Shared understanding of the statutory health and well being requirements for the Board
2. The Operation of the Board	<ul style="list-style-type: none"> ▪ Right Board membership ▪ Secretariat in place to support the Board: clear and effective governance ▪ Subject matter expertise (capacity and capability) in place to deliver aims across many agencies
3. Links with Other Parts of the System	<ul style="list-style-type: none"> ▪ Mapping of relevant stakeholders etc ▪ Clear understanding of respective roles and responsibilities ▪ Effective communications
4. Integrated Strategic Needs Assessment	<ul style="list-style-type: none"> ▪ Fully integrated assessment of health and well being for all ages ▪ Assessment of the needs of different localities ▪ Alignment of needs assessment and mapping of resources across agencies
5. Health and Well Being Strategy	<ul style="list-style-type: none"> ▪ Comprehensive system wide plan addressing the broad determinants of health and well being ▪ Clear and manageable set of priorities, but with some quick wins ▪ Funding aligned to priorities ▪ Measurable improvements in health and well being in Herefordshire
6. Public Accountability and Community	<ul style="list-style-type: none"> ▪ High profile for health and well being in Herefordshire ▪ Public engagement in the work of the Board

Engagement	<ul style="list-style-type: none"> ▪ Increase in personal responsibility for health and well being
7. Delivery	<ul style="list-style-type: none"> ▪ Integration of health and well being services, interventions and workforce ▪ Pooled budgets ▪ Local delivery teams working in each of the 9 localities
8. Performance Management	<ul style="list-style-type: none"> ▪ Evidence based performance improvements ▪ Return on investment ▪ Performance outcomes supported by qualitative evidence of effective local delivery
9. Organisational Development	<ul style="list-style-type: none"> ▪ Shared understanding of what we need to do be successful ▪ Workforce is developed to deliver outcomes
10. Roadmap	<ul style="list-style-type: none"> ▪ Comprehensive plan is in place to achieve our aims ▪ Effective communications

Support for the Board

- 6 An outline project resource plan has been produced to ensure that roles and responsibilities are clear in supporting the HWBB. Sarah Aitken is the corporate lead for the Board and Clare Wichbold is the lead Project Officer.

Community Engagement Events

- 7 Planning for community engagement events across the 9 localities on the theme of health and well being has started, with support from Inlogov. The aim is to link health and well being engagement with existing community engagement initiatives on health matters and the wider work on localities.

Herefordshire Public Services

- 8 Following consultation with the three partners, a Herefordshire Public Services Board is being established to oversee the partnership between Herefordshire Council, Herefordshire Health-Care Commissioners and NHS Herefordshire.
- 9 The Board will provide a forum for the agreement of integrated structures and budgets to realise both the strategic vision for Herefordshire and the implementation of joint commissioning plans agreed by the HWBB; the promotion of system wide integration within the county and to oversee the transition through the NHS and public health reforms. The first meeting of the new board will be on 1 November 2011.

Health and Wellbeing Board Early Implementers: National Learning Sets

- 10 National Learning sets are being established as part of the HWBB Early Implementers programme. The Learning Set themes are:

- Improving the health of the population
- Bringing collaborative leadership to major service reconfiguration
- Creating effective governance arrangements
- How do we “hard wire” public engagement into the work of the board?
- Raising the bar in joint needs assessment and strategies
- Making the best use of collective resource
- Improving services through more effective joint working

11 Herefordshire’s participation in this initiative has been accepted and we are likely to engage, in particular, in the themes of governance and collaboration. The programme will be launched at a national event on 15 November 2011 by Minister of State for Care Services, Paul Burstow MP.

Implementation of NHS, Public Health and Social Care Reforms

12 The NHS Herefordshire Board receives a regular report on the transition plan for the implementation of the NHS, Public Health and Social Care Reforms, including the development of the HWBB. An extract from the last report to the meeting of the Board on 13 September is attached for information as **Appendix A**.

13 Of particular note is the acceleration of the work to transform Public Health. Chris Bull is chair of the Public Health Engagement Group, which is providing a focus for the Autumn reform updates covering:

- Public Health England Operating Model
- Public Health funding
- Public Health role of local government, including Directors of Public Health
- Public Health outcomes framework
- Consultation on the workforce strategy

Work Plan

14 A draft outline Work Plan has been produced to support the Board’s development (**Appendix B**). The Work Plan picks up the key development themes agreed by the Board such as Alcohol, developing the HWB Strategy, Prevention, CCG Commissioning plans, Community Engagement Plan

15 A guiding principle is that agenda planning for the Board will be undertaken jointly across a number of key areas, including:

- Strategic planning
- JSNA/Integrated needs assessment
- Commissioning priorities
- Budget consultation, engagement and priority setting
- Health and Well Being Board and strategy

- 16 An internal Officer planning group has been established to develop this common agenda with representation from the Council (Cabinet and Overview and Scrutiny), PCT, CCG, Herefordshire Partnership and Safeguarding Boards.
- 17 Until April 2012, the Board will alternate formal and workshop meetings to allow space for development.
- 18 The Board is invited to review and amend the Work Plan as necessary.

Next Steps

- 19 As part of the Board's development, a number of actions will be taken forward over the next few months, including (not exhaustive):
 - Developing the joint work plan
 - Understanding the role of the HWBB during the shadow period in relation to CCG commissioning plans
 - Engaging other stakeholders in the development of Herefordshire's approach to HWB
 - Agreeing the health and well being priorities for the next year or so; as a first stage reviewing current plans and strategies (taking a broad view) that cover health and well being
 - Completing the refresh of the JSNA and starting work on the more comprehensive Integrated Needs Assessment
 - Completing the 9 local engagement exercises on health and well being priorities
 - Asking services/agencies to state their contribution to the health and well being agenda
 - Developing communications actions in conjunction with the joint communications plan already agreed for health and social care changes, including the "branding" for the Board
 - Producing a scoping paper for a health and well being website/portal and directory of local services – this is a joint initiative with the CCG
 - Ensuring that the Board's development is aligned with that of the newly restructured Herefordshire Partnership
 - Participating in the Early Implementer Learning Sets
- 20 The Board may wish to identify other areas for action.

NHS HEREFORDSHIRE TRANSITION PLAN (SEPTEMBER 2011)

STRAND	OUTCOMES	LEAD	KEY MILESTONES
HEREFORDSHIRE REFORMS			
Mental Health Procurement	<ul style="list-style-type: none"> • <i>Procurement of a new mental health provider to meet our agreed service and financial outcomes</i> • Update: work is underway on the future delivery of learning disability services within the contract 	Ann Donkin Director of Resources & Delivery	<ul style="list-style-type: none"> • All key milestones met
Integrated Care Organisation (ICO)	<ul style="list-style-type: none"> • <i>Creation of the Integrated Care Organisation to deliver the outcomes agreed by the Board as part of the recommendations of the Transition Board for the transfer of community services</i> • Update: <ul style="list-style-type: none"> ○ Contract signed and new arrangements in place (Wye Valley NHS Trust) on 1st April 2011 ○ QIPP Delivery Board meeting to review delivery of agreed outcomes 	Ann Donkin Director of Resources & Delivery	<ul style="list-style-type: none"> • All key milestones met • Integrated health and social care commissioning plan and the ICO integrated business plan agreed by Boards mid February 2011 • Transfer agreement signed 1st April 2011 • Heads of Agreement for contract signed on 1st April 2011 • Section 75 (provider) agreement Adult Social Care signed 1st April 2011

HEALTH WHITE PAPER REFORMS

<p>Clinical Commissioning Group (Herefordshire Health-Care Commissioners)</p>	<ul style="list-style-type: none"> • <i>Establishment of a Clinical Commissioning Group for Herefordshire to deliver clinically led commissioning</i> • Update: <ul style="list-style-type: none"> ○ Changes required to Consortia membership and governance have largely been established locally with the current membership ○ Update on work plan on the Board agenda ○ Process for authorisation to be agreed 	<p>Chair Chief Executive, Dr Andy Watts Director of Resources & Delivery</p>	<ul style="list-style-type: none"> • Herefordshire is a Pathfinder for CCG • Shadow CCG in place by April 2011 • Plan agreed in January/February 2011 to manage the phased transfer of responsibilities from April 2011 • Board agreement for GPC to be a sub committee of the Board from April • Outline Work Plan presented to the Board in May • Updates to each Board meeting
<p>Clinical Commissioning Group (Herefordshire Health-Care Commissioners) Support Requirements</p>	<ul style="list-style-type: none"> • <i>The Clinical Commissioning Group is supported by the PCT to develop a structure to deliver its new responsibilities</i> • <i>The Clinical Commissioning Group has the skills, knowledge and capacity needed to discharge its new role</i> • Update: <ul style="list-style-type: none"> ○ Weekly meetings taking place to plan support ○ Transition Team supporting the CCG ○ Work underway to align the Transition 	<p>Deputy Chief Executive Director of Resources and Delivery</p>	<ul style="list-style-type: none"> • Developing an “offer” for the CCG to deliver commissioning, research and business support • A plan for skills and knowledge transfer and the transfer of appropriate people to the CCG over time • Compliance with the Guidance on assignment • Alignment between the CCG transition structure and

	structure with the Organisational Design Phase 3 proposals		Organisational Design Phase 3
Health and Well Being Board	<ul style="list-style-type: none"> • <i>Health and Well Being Board is established by Herefordshire Council to meet new requirements</i> • <i>Health and Well Being of residents is increased through joint local leadership of health, social care and public health commissioning</i> • Update: <ul style="list-style-type: none"> ○ Fourth (workshop) meeting of the HWBB held on 13 September ○ Development Framework and Work Plan in place ○ Initial priorities include development of an Alcohol Strategy for Herefordshire ○ 9 local stakeholder events to take place in the Autumn 	Deputy Chief Executive Director of Public Health	<ul style="list-style-type: none"> • Herefordshire Council is an early implementer for the Health and Well Being Board • Stakeholder consultation Workshop to develop Herefordshire's approach February 2011 • HWBB established by the Council in March 2011 • First meeting of the Shadow Board held on 14 April 2011 • Workshop on 16 June on the HWBB development plan • Proposals for new JSNA agreed in June 2011 • Inlogov, University of Birmingham, appointed to support the development of health and well being in Herefordshire Draft HWB Strategy produced by October 2011
HealthWatch	<ul style="list-style-type: none"> • <i>Establishment of HealthWatch Herefordshire building on the LINK and existing engagement</i> 	Assistant Director Customer Services and	<ul style="list-style-type: none"> • Discussion paper on outcomes and options produced January 2011

	<ul style="list-style-type: none"> • Update: <ul style="list-style-type: none"> ○ New host contract awarded to Shaw ○ HealthWatch Pathfinder application successful ○ Discussions with the LINK about the transition plan 	Communication S	<ul style="list-style-type: none"> • Pathfinder application to be submitted by 11 May 2011 • HealthWatch transition plan to be agreed by December 2011
PUBLIC HEALTH REFORMS			
Public Health	<ul style="list-style-type: none"> • <i>Responsibility for the health of the population and Director of Public Health is transferred to Herefordshire Council</i> • <i>Plan in place to improve health outcomes for residents</i> • Update: <ul style="list-style-type: none"> ○ Public Health White Paper Update and Next Steps published 14 July 2011 ○ Local transition plan to be revised as part of Phase 3 of the OD project ○ Risks of Public Health transition from NHS Herefordshire to Herefordshire Council identified and managed ○ Core public health offer to the Clinical Commissioning Group agreed 	Director of Public Health	<ul style="list-style-type: none"> • Discussion paper about the outcomes we want to see and the different models to achieve this by January 2011 • Stakeholder consultation event on Public Health and HWBB in February 2011 • Herefordshire Public Services response to the consultation on the public health white paper March 2011 • Director of Public Health and staff integrated into structure of new HPS People Services Directorate April 2011 • Consultant in Public Health on HHCC Shadow Board • West Mercia Public health

			<p>network risk assurance framework developed and updated quarterly, most recent update 15 September 2011</p> <ul style="list-style-type: none"> Assurance visit by Regional Director of Public Health arranged for 24 October 2011
CROSS CUTTING REQUIREMENTS			
Governance	<ul style="list-style-type: none"> <i>Governance is in place to oversee the transition and discharge existing responsibilities and objectives</i> <i>New structures are in place to meet national requirements for GP led commissioning and the Health and Well Being Board</i> Update: <ul style="list-style-type: none"> Task and Finish Sub Group established Final report to Board 25 May 2011 Update on recommendations on Board agenda 	<p>Assistant Director Law and Governance Board Secretary Director of Quality and Clinical Leadership</p>	<ul style="list-style-type: none"> Establish Task and Finish Group December 2010 Refresh of governance January 2011 GP Sub Committee of the Board April 2011 Health and Well Being Board in place April 2011 Cluster level workshop July 2011 to discuss Quality and safety at CCG level and Cluster Level
Organisational Development	<ul style="list-style-type: none"> <i>PCT employees are supported through the change</i> <i>PCT meets its management costs reduction targets</i> Update: <ul style="list-style-type: none"> Ongoing discussions across the West Mercia Cluster about opportunities for 	<p>Deputy Chief Executive Director of Resources & Delivery Assistant Director People, Policy &</p>	<ul style="list-style-type: none"> Local management of change policies are in place MARS applications approved Organisational Design changes agreed to reduce management costs and share functions across HPS: Phase 1 December 2010;

	<p>mutual support if capacity reduces in critical areas</p> <ul style="list-style-type: none"> ○ NHS HR Framework published 	Partnerships	Phase 2 March 2011, Phase 3 July 2011
Quality and Safety	<ul style="list-style-type: none"> • <i>Standards quality and safety are maintained during a time of significant change</i> • <i>Responsibility for QIPP Outcomes and Targets is transferred to the GP Consortium</i> • Update: Clinical Leads from the CCG within each workstream are focused on QIPP Delivery 	<p>Director of Resources and Delivery Director of Quality and Clinical Leadership</p>	<ul style="list-style-type: none"> • Action Plan agreed to ensure the continued focus on quality and safety • Plan to transfer the QIPP Outcomes and Targets
Communication and Engagement	<ul style="list-style-type: none"> • <i>Stakeholders are fully engaged in and help to shape the NHS reforms</i> • <i>Employees are fully engaged in and help to shape the NHS reforms</i> • Update: Patient and Public Experience workshops held with CCG and other stakeholders 	<p>Deputy Chief Executive Assistant Director Customer Services and Communications</p>	<ul style="list-style-type: none"> • A Communications and Engagement Plan is woven into each aspect of the Transition Plan • Joint Communications Plan agreed by the Board July 2011 • Regular Stakeholder events are held: <ul style="list-style-type: none"> ○ 7 December 2010 ○ July 2011 (AGM) ○ Next one: to be confirmed
Transition Management	<ul style="list-style-type: none"> • <i>A smooth transfer of functions, assets and liabilities of NESH to the successor bodies achieved</i> • Update: <ul style="list-style-type: none"> ○ This will be subject national guidance, particularly for finance and property • Legacy document updated for 	<p>Director of Resources and Delivery Board Secretary</p>	<ul style="list-style-type: none"> • A plan is in place with the key assets and liabilities • Draft Legacy document considered by the Board July 2011

	September 2011 Board		
Links	<ul style="list-style-type: none"> • <i>Links between the Transition process and other key activities for NHHH and HPS are mapped and co-ordinated</i> • Update: links being managed by the Transition Team and HPSLT 	Deputy Chief Executive	<ul style="list-style-type: none"> • Map the links between the Transition process and other key activities by January 2011
Risks	<ul style="list-style-type: none"> • <i>Risk are managed and resilience is maintained throughout the transition process</i> • Update: update on risks within the Board Assurance Framework 	Assistant Director Law and Governance Board Secretary	<ul style="list-style-type: none"> • Initial assessment of risks reported to Board December 2010 • Cluster Resilience plan in place December 2010 • Risk Log for the Transition process in place by January 2011 • Resilience Risk register incorporated within the BAF

HEALTH AND WELL BEING BOARD
DRAFT OUTLINE WORK PLAN

MEETING	AGENDA ITEMS	LEAD
22 November (W)	Updates <ul style="list-style-type: none"> • CCG Update • HPS Update • Work Plan 	Clare Wichbold
	Strategy & Development <ul style="list-style-type: none"> • Draft Alcohol Strategy • Health and Well Being Strategy – Session 2: Outcomes • Community Engagement Feedback & Plan • Healthy Herefordshire Workforce Plan • Health and Well Being Portal 	Sarah Aitken Sarah Aitken Clare Wichbold Lucy Marder Simon Collings
	System Leadership <ul style="list-style-type: none"> • CCG Authorisation Process 	Dr Andy Watts
13 December	Updates <ul style="list-style-type: none"> • CCG Update • HPS Update • Work Plan • Public Health Transition Update 	Clare Wichbold
	Strategy & Development <ul style="list-style-type: none"> • Draft Health and Well Being Strategy • Alcohol Commissioning Plan • INA Project Update 	Sarah Aitken Sarah Aitken Alison Talbot-Smith
	System Leadership <ul style="list-style-type: none"> • CCG Commissioning Plan 	Dr Andy Watts
17 January 2012 (W)	Updates <ul style="list-style-type: none"> • CCG Update • HPS Update • Work Plan 	Clare Wichbold
	Strategy & Development <ul style="list-style-type: none"> • Health and Well Being Strategy: Action Planning • Workforce Reform 	Sarah Aitken Jenny Lewis
	System Leadership <ul style="list-style-type: none"> • Service Integration & Pooled Budgets 	
21 February 2012	Updates <ul style="list-style-type: none"> • CCG Update 	Clare Wichbold

	<ul style="list-style-type: none"> • HPS Update • Public Health Transition Update • Work Plan 	
	Strategy & Development <ul style="list-style-type: none"> • Health and Well Being Strategy Approval • INA Project Update 	Sarah Aitken Alison Talbot-Smith
	System Leadership <ul style="list-style-type: none"> • CCG Commissioning Update 	Dr Andy Watts
20 March2012 (W)	Updates <ul style="list-style-type: none"> • CCG Update • HPS Update • Work Plan 	Clare Wichbold
	Strategy & Development <ul style="list-style-type: none"> • Health and Well Being Strategy: Performance Management 	Sarah Aitken
	System Leadership <ul style="list-style-type: none"> • 	
17 April 2012	Updates <ul style="list-style-type: none"> • CCG Update • HPS Update • Public Health Transition Update • Work Plan 	Clare Wichbold
	Strategy & Development <ul style="list-style-type: none"> • Review of Health and Well Being Strategy • INA Project Update 	Sarah Aitken Alison Talbot-Smith
	System Leadership <ul style="list-style-type: none"> • First Annual Report • CCG Commissioning Update 	Dean Taylor Dr Andy Watts

Notes:

1. (W) Denotes Workshop
2. Scheduling is indicative in some cases and will be firmed up as part of the joint agenda planning work
3. Work Plan will be updated each month