
DUDLEY HEALTH AND WELL-BEING BOARD

29th April 2013

Joint Report of the Director of Adult, Community and Housing Services, Director of Children's Services, Director of the Urban Environment, the Director of Public Health and the Chief Officer of the Dudley Clinical Commissioning Group

**NEXT STEPS FOR THE HEALTH AND WELL-BEING BOARD INCLUDING
WORK PROGRAMME FOR 2013/14**

Purpose of Report

1. For the Dudley Health and Well-Being Board to confirm next steps and its work programme for 2013/14 following the "go-live".

Background

2. From 1st April 2013, the Dudley Health and Wellbeing Board is a statutory Board. This Report covers a range of matters relating to the purpose and conduct of the Board going forward, given the development it has undergone so far. It addresses the following issues:
 - Joint Health and Well-Being Strategy development and the Joint Strategic Needs Assessment;
 - Draft Work Programme 2013/14
 - Governance
3. Joint Health and Well-Being Strategy and Joint Strategic Needs Assessment
 - 3.1 The Board's first Joint Health and Wellbeing Strategy has been produced following wider significant public engagement and involvement of the Board through its development sessions and meetings in public in the development of the Strategy.
 - 3.2 The Board has expressed a wish to review the Strategy in an appropriate manner in 2013/14. Doing this, will allow the Board to continue its overall learning-by-doing approach and to take stock in the light of the direction which it has given to its activity overall. It is not envisaged that the Strategy needs to be re-written.
 - 3.3 Likewise, significant work has been done to update Dudley's Joint Strategic Needs Assessment and a 2012 "JSNA Synthesis" document completed. This sets out key questions for Commissioners of health and social care services, which it is intended be used in the preparation of Commissioning Plans during 2013-14 for 2014-15 and beyond.

3.4 The JSNA website – which has a considerable volume of JSNA content – has been developed over the years as part of the Dudley Community Partnership (DCP) website. The DCP website is being decommissioned and it is planned that the JSNA content will be migrated to a new technical infrastructure under the auspices of DMBC's Research & Intelligence team. The new system has been commissioned and is currently being built.

Work programme 2013/14

6.1 The Board has adopted a learning-by-doing methodology since its inception in 2011/12 and run successful development events as part of this approach. This has included both in-house and external support for its development from the Local Government Association, the Centre for Public Scrutiny and the NHS Leadership Academy.

6.2 Following information shared with the Board at its Development Session on 13th February 2013, it will be recommended that the Work Programme is arranged in the following general way.

6.3 "Spotlight" sessions – It is acknowledged that the development sessions have done what they set out to achieve in helping the Board set its working environment, priorities and approach. Although the Board may wish to consider if it wishes to engage in more development activity, it has been proposed that the development sessions be replaced with five "Spotlight" events designed to focus on issues connected to the delivery of the Strategy of the five priorities of the Joint Health and Well Being Strategy. Following debate and influence from Board members, it is envisaged that the following event design features for the Spotlight sessions will apply:

- **Purpose / Approach / questions –**
 - to ask what are the wicked issues on each theme?
 - What might the different ways of tackling these be?
 - How can we work across our agencies better?
 - Allows continued focus on generic issues through each theme as appropriate e.g. engagement; safeguarding and broader quality and safety issues; health improvement and health inequalities.

- **Ways of working –**
 - Preparation and planning required
 - Sessions can be led by someone not of the assumed lead service area for the theme.
 - Expertise of assumed lead needed, however.
 - Possible link to MBC Leadership Programme for sponsors?
 - NB. Although these are not "meetings in public," it is not envisaged that they are private or closed sessions just for Board members
 - Reports / analysis

- **Attendees:**
 - The Health and Wellbeing Board members
 - Any relevant stakeholders by invitation including – people using health and care services i.e. these are not 'closed' meetings and are meant to be inclusive to support agenda development-

- HWBB & any other colleagues needed including providers of health and care services or other health and wellbeing services, people using services, people from other relevant agencies

Overall, it is understood that the Board wish to be inclusive and open and engage with anyone who can influence leadership to improve the health and wellbeing of Dudley people. With issues such as wider business planning in mind e.g. timing of the Clinical Commissioning Group's Commissioning Strategy, the following timetable is recommended:

SPOTLIGHT MEETINGS		
	DATE (TBC)	THEME
1	XX /06/13	Spotlight On... <i>Making our services healthy</i>
2	XX/07/13	Spotlight On... <i>Making our lifestyles healthy</i>
3	XX/10/13	Spotlight On... <i>Making our children healthy</i>
4	XX/11/ 13	Spotlight On... <i>Making our minds healthy</i>
5	XX/02/14	Spotlight On... <i>Making our neighbourhoods healthy</i>

6.4 Meetings in public – taking into account the responsibilities of the Board, it is suggested that there continue to be four meetings in public within a slightly different format as follows:

- First meeting: an Inaugural (and thereafter annual) HWBB Conference / Event. It is envisaged that this would be a large-scale event with as many as 150-200 people invited. A suggested list of attendees is outlined within the table below.
- Three following meetings: would follow the standard Council approach and based around the following headings:
 - JHWBS & HWBB Strategies – reporting or issues for consideration as needed as determined by Board members throughout the year
 - Engagement & report from Healthwatch Dudley
 - Performance and Outcomes Framework – the Editorial Group will need to determine an approach to this theme
 - Quality & Safety: the Editorial Group will need to determine an approach to this theme
 - Governance – as required

6.5 This suggested approach is presented in a tabulated format on the following page and includes items already determined for consideration as relevant.

MEETINGS IN PUBLIC	
DATE	AGENDA ITEMS
26/06/13	<p style="text-align: center;">INAUGURAL HWBB CONFERENCE / EVENT</p> <p>Attendees: people using health and care services; children and young people; carers; NHS providers; health and social care providers; representatives of staff working in health and well being related professions; Trades Unions; Elected Members; member of NHS FT governing bodies; those working on broader, wider determinants of health work; etc.</p> <p>Programme: programme to be concluded and to include JHWBS formal launch</p>
09/09/13	<ul style="list-style-type: none"> • <i>JHWBS & HWBB Strategies</i> – reporting or issues for consideration as needed • <i>JSNA</i> – update and arrangements for 13/14 • <i>Engagement</i> & report from Healthwatch Dudley • <i>Performance and Outcomes Framework</i> reporting including proposals for reporting 13/14 and issues of health inequality • <i>Quality & Safety:</i> Annual Reports of the Dudley Safeguarding Adults Board & the Dudley Safeguarding Children’s Board • <i>Governance</i> – Membership; Terms of Reference; Protocols
28/01/14	<ul style="list-style-type: none"> • <i>JHWBS & HWBB Strategies</i> – reporting or issues for consideration as needed • <i>Engagement</i> & report from Healthwatch Dudley • <i>Performance and Outcomes Framework</i> reporting • <i>Quality & Safety:</i> • CCG Commissioning Strategy
24/03/14	<ul style="list-style-type: none"> • <i>JHWBS & HWBB Strategies</i> – reporting or issues for consideration as needed • <i>Engagement</i> & report from Healthwatch Dudley • <i>Performance and Outcomes Framework</i> reporting • <i>Quality & Safety:</i> tbc

6.6 It should be noted that should the Chair wish to do so, then extra meetings can be called through the year if the need arises. The Board may also wish to consider any issue connected to decision-making for the Board outside of its formal meeting structure, should the need arise. The Board may also wish to note capacity considerations to support the Board as changes of portfolio of personnel are effected.

7.0 Governance

7.1 Board Membership 2013/14: given changes in the local and regional work environment such as the closedown of the Primary Care Cluster and the establishment of a Healthwatch Dudley, an updated list of Members of the Board defined by roles is attached at Appendix 1 for comment and approval.

7.2 Delivery Mechanisms – Appendix 2 is a suggested Structure Chart for the Board's comment and consideration following initial sharing of this information at its February 2013 Development Session.

7.3 Location for meetings – the Board has considered a variety of issues relating to the style and purpose of the meetings of the Board. One suggestion has been that the location for the meeting might be varied and the Board is invited to reflect on this.

7.4 The Local Authority (Public Health, Health and Wellbeing Board and Health Scrutiny) Regulations 2013 – were published in February 2013. The regulations

- enable Boards to set up sub-committees if a Local Authority so wishes
- enable Boards to treat non-voting members of a Board, a sub-committee of the Board , or a joint sub-committee of two or more such Boards as a voting member if the Local Authority so wishes before making a direction to do so the Local Authority must consult the Health and Wellbeing Board.
- disapply the political balance requirements when appointing elected members to serve on Health and Wellbeing Boards.

The Health and Wellbeing Board is a partnership body with the aim of promoting greater collaboration between all partners involved. It is suggested that formal voting rights remain unchanged as they have operated successfully under the "shadow" arrangements for the last two years.

7.5 The Council will consider a recommendation of the Health and Wellbeing Board on governance arrangements and voting at the Annual Meeting on 16th May,2013.

Finance

8. Any financial implications arising from the content of this Report will be met from within existing budgets between the agencies.

Law

9. The background to the development of Health and Well Being Boards and the production of Joint Health and Well-Being Strategies lies in the guidance issued to

date leading up to the enactment of the Health and Social Care Act 2012 and associated regulations.

Equality Impact

10. The establishment of a Dudley Health and Well-Being Board provides an opportunity to extend the influence of the Council in working more closely with partners, particularly GP and Clinical Commissioners, to consider equality issues through the work of the Board including the development of a Joint Health and Well Being Strategy. This Strategy will need to be informed by other strategies and principally the Health Inequalities Strategy.

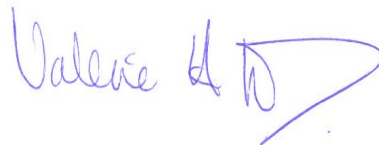
Recommendation

11. That the Dudley Health and Well-Being Board: -

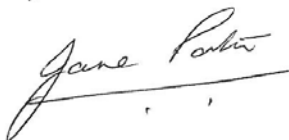
- Note the arrangements regarding the Joint Health and Well Being Strategy and the Joint Strategic Needs Assessment
- Consider if it wishes to have more development sessions during the coming year
- Note and comment on the Work Programme with specific reference to approving:
 - The recommended approach for the Spotlight session
 - The recommended approach for the meetings in public including the proposal for an HWBB Annual Conference
- Approve the governance arrangements as set out in Appendix 2 and that no changes be made to current voting arrangements.
- Consider the possibility of varying the location for the meeting in public



**Andrea Pope- Smith
Director – DACHS**



**Valerie A Little
Director of Public Health**



**Jane Porter
Director – DCS**



**John Millar
Director – DUE**



Paul Maubach

**Chief Officer
Dudley CCG**

Contact Officers:

Brendan Clifford
Assistant Director – DMBC DACHS

Ian McGuff
Assistant Director – DMBC DCS

Sue Holmyard
Assistant Director – DMBC DUE

Neill Bucktin
Associate Director –Dudley CCG

Josef Jablonski
Principal Officer – DMBC CRD

Karen Jackson
Public Health Consultant

DUDLEY HEALTH AND WELLBEING BOARD MEMBERSHIP BY ROLE

1.0 DUDLEY MBC

Elected Members:

Cabinet Member for Health and Well-Being
Cabinet Member for Adult and Community Services
Cabinet Member for Integrated Children's Services
Opposition Group representative

Officers:

Director of Adult, Community and Housing Services
Director of Children's Services
Director of Urban Environment (or his/her nominee)
Director of Public Health
Chair of Children's Safeguarding Board

2.0 DUDLEY CLINICAL COMMISSIONING GROUP

2 x GPs
CCG Chief Officer

3.0 NHS ENGLAND LOCAL AREA TEAM FOR BIRMINGHAM, SOLIHULL AND THE BLACK COUNTRY

Director of Finance – nominated Dudley link

3.0 VOLUNTARY / COMMUNITY SECTOR AND PATIENT REPRESENTATIVE

Healthwatch Dudley
Dudley CVS Chief Executive

NOTE: Other NHS providers which include the Dudley Group of Hospitals NHS Foundation Trust; the Dudley and Walsall Mental Health Partnership NHS Trust; the Black Country Partnership NHS Foundation Trust or any others may also be invited as appropriate.

Other partners who contribute to the Health and Well Being agenda may be invited as requested by the Board.

In attendance:

Assistant Directors – Dudley Council
CCG Head of Partnerships

**DUDLEY HEALTH AND WELLBEING BOARD – DRAFT (04/02/2013)
SUGGESTED STRUCTURE / GOVERNANCE ARRANGEMENTS**

APPENDIX 2

