

AGENDA ITEM

REPORT TO HEALTH AND WELLBEING BOARD

28 SEPTEMBER 2016

REPORT OF DIRECTOR OF ADULTS AND HEALTH / ASSISTANT DIRECTOR DEMOCRATIC, ELECTORAL & ADMINISTRATION

Progress Report on HWB Development

SUMMARY

Following the Peer Review in January 2016, the Health and Wellbeing Board (HWB) recently had a facilitated development day focusing on the key recommendations from the review.

Specifically the issues of systems leadership and the integration of health and social care were prioritised and the purpose of this report is to summarise those discussions and to recommend the vision, principles and basis for the role of HWB in systems leadership and integration.

RECOMMENDATIONS

1. It is recommended that the Board agree the vision for and principles of integration

DETAIL

2. The HWB is cognisant that whilst it has an important pivotal role in system leadership nevertheless it operates in a complex governance system where each of the members of the HWB have their own statutory governance arrangements. Therefore one of the key challenges for the HWB is to recognise what is within its remit and what is more appropriate for individual organisations.
3. The area of Health and Social Care integration is of strategic importance to all of the individual organisations on the Board, not simply because of the financial pressures faced by each organisation, but because there is an increasing evidence base that the customer receives better public services with better outcomes in health and social care when they are at the centre and focus of delivery.
4. The Board agreed the key characteristics for good system leadership these included:
 - focus on customers' needs
 - operating and acting in the interests of all organisations
 - an understanding of governance, culture and accountability across organisations
 - a clear, shared vision and objectives
 - an ability to drive continuous improvement
 - recognition of staff as the greatest asset and support and develop them

- ability to remove barriers
 - Innovative in approach and open to new ideas
 - Maximising value for money
 - Managing demand and expectations
 - Confident making decisions based on a strong evidence base
 - Communicates clearly and listens to and seeks feedback
 - Flexibility
 - Challenging
5. The Board considered the vision for integration and agreed it should reflect integration around the needs of the individual with a clear sense of purpose rather than integration for merely the sake of it. In addition the Board agreed that this vision should build on the previously agreed vision for integration for our local better care fund which is widely accepted by all partners;
- Meeting patient needs **now and future proofing** for the coming **generation** with **consistently better** health and social care delivered in the **best place**"*
- ... and within available resources
6. The Board considered the potential impact on organisational and management structures and agreed that this should not be the focus of local discussions; rather we should focus on the customer pathway and experience.
7. The principles of integration the Board agreed were
1. Integration from the perspective of the customer
 2. Areas prioritised by the benefit that integration may bring by application of viability testing through the existing Health and Wellbeing partnerships
 3. Partnerships will determine the parameters of the options for integration and the commissioning groups will facilitate this.
8. The basis of viability testing should as a minimum consider
1. Which outcomes may be improved by integration, why integration is the answer and not usual service improvement?
 2. Is this integration a multi-agency or single agency solution?
 3. What is the scale of the opportunity presented by integration?
 4. What is the current cost v VFM and what are the potential costs / benefits or risks posed by this proposal for integration?
 5. What does customer feedback tell us on the current service and how it could be improved by integration?
 6. Does integration present prevention opportunities?
9. Once the partnerships have considered and sought agreement on the key areas for integration the partnership needs to undertake detailed work to understand the current customer journey and to design the future customer journey. This may involve work outside the main meeting to examine areas associated with the customer journey for example data sharing, single lead agency / individual, and single plan for the customer. The evidence case for integration based on the viability tests needs to be robust.

10. The Board considered areas that currently present for change and prioritised three areas
 1. SEND
 2. Older people
 3. Domestic abuse
11. The Board has ultimate oversight of Health and Social Care integration and will be responsible for ensuring the requirements for delivering integration locally are implemented as required by the Department of Health by April 2017.
12. It is recommended that the Board agree the characteristics as set out in this paper for HWB to exercise system leadership locally.
13. It is recommended that Board agree the Vision for and principles of integration and that these three areas at para 10 are prioritised.

FINANCIAL IMPLICATIONS

14. No direct financial implication

LEGAL IMPLICATIONS

15. No direct legal implication

RISK ASSESSMENT

16. Any risks arising will be mitigated through normal day to day management controls

COUNCIL PLAN IMPLICATIONS

17. Positive impact across all policy priorities

CONSULTATION

18. The report reflects the outcomes of the Health and Wellbeing Board development day.

Name of Contact Officer: Margaret Waggott
Assistant Director of Administration, Democratic &
Electoral Services

Telephone No: 01642 527064

Email address: margaret.waggott@stockton.gov.uk