

## Headline Messages

- “HWB Board needs to fulfil its leadership role by grappling with the immediate and urgent strategic challenges facing the local health and care system”. Particularly need to: drive forward more service integration, be clear about future arrangements for joint commissioning and take stock of primary care.
- A more systematic approach in the use of local intelligence and evaluation would unlock the potential for scaling up innovative work to focus on prevention and tackle local health inequalities.

## Key Recommendations

- “Review focus and capacity of HWBB in light of new challenges to provide the momentum for it to be seen by all partners as an ambitious leader that enables a shift from partnership working to transformation”

### “Ensure HWB Board:

- Focuses on the big challenges that will deliver better outcomes for Southend (primary care, acute services, early years and integration)
- Is clear about the shared and individual roles and responsibilities in relation to their position on the Board
- Is confident to be constructively challenging and is demonstrating accountability
- Has tighter outcome focused agendas and regular development opportunities to stay ahead of the game in a constantly changing and complex policy and financial environment
- Support the CCG in developing their local capacity
- Urgently develop joint commissioning arrangements to maximise opportunities from integration and the Better Care Fund
- Strengthen community engagement and resilience.
- Evaluate all innovative projects to scale up work to reduce health inequalities across the whole of Southend”

## Summary of recommendations

Working Groups - **JEG**: Joint Executive Group *inc. Joint Commissioning*. **CEWG**: Communications and Engagement Working Group. **BPWG**: Board Progression Working Group

		<b>Theme 1: Board dynamics</b>
Recommendations for Board to Address		<ul style="list-style-type: none"> <li>• <b>Ensure Board has a collective clarity of purpose.</b></li> <li>• <b>Ensure partners understand each other’s needs and constraints.</b></li> <li>• <b>Strengthen accountability by being clear how each partner is contributing.</b></li> <li>• <b>Increase ‘visibility’ of Board so it is seen as the primary strategic forum.</b></li> <li>• <b>Better communicate the Board’s progress and influence</b></li> <li>• <b>Be comfortable with constructive challenge from across the partnership.</b></li> <li>• <b>Ensure there is mutual holding to account for delivery of the JHWS</b></li> </ul> <p><i><b>Bold/Shaded points are suggested for priority HWB Board focus</b> Non-shaded points are suggested for delegated working group’s focus</i></p>
Recommendations for Working Groups to Address	BPWG	<ul style="list-style-type: none"> <li>• Reduce formality and ‘scrutiny feel’ of Board meetings and encourage debate, interaction and mutual challenge                             <ul style="list-style-type: none"> <li>-Ensure agendas aren’t overloaded and there is space for debate - Partners question whether meetings are designed &amp; managed to achieve maximum impact.</li> <li>- Important to protect HWBB discussion time</li> <li>- Could use email to share info, and ask for feedback on strategies &amp; reports which don’t require discussion - opportunity to implement offline mechanisms</li> </ul> </li> </ul>
	JEG	<ul style="list-style-type: none"> <li>• Better involve partners in agenda setting</li> </ul>
	JEG	<ul style="list-style-type: none"> <li>• Maximise working group structure and support staff in relation to data intelligence, community engagement &amp; communication i.e. maximising use of Joint Executive Group (JEG). Maximise use of Joint Commissioning working group function to tackle the big financial challenges and shape the wider health economy.</li> </ul>
	JEG	<ul style="list-style-type: none"> <li>• Focus on outcomes, not services - to shift from providing services it has always provided to using resources to make an impact on the wellbeing of the community within the context of financial constraints.</li> </ul>
	JEG	<ul style="list-style-type: none"> <li>• Better define relationship between Healthwatch, HWBB and Scrutiny. Nurture Healthwatch.</li> </ul>

<p>W- GROUP</p> <p>Board</p> <p>Recommendations for Working Groups to Address</p> <p>JEG</p> <p>↓</p>	<p><b>Theme 2: Data intelligence &amp; Performance management</b></p> <ul style="list-style-type: none"> <li>• Find focus between short &amp; longer term priorities, align implementation plans and put outcome based measures in place.</li> <li>• Ensure arrangements for evaluating the effectiveness of HWB work and action plans are defined.</li> <li>• Ensure HWB look at primary care data to better understand quality improvement.</li> <li>• Data collation is fragmented – consider system wide commitment or protocol on data sharing.</li> <li>• Consider developing JSNA into a ‘community information database’ and taken down to ward level</li> <li>• Ensure JHWS is monitored using up to date data intelligence, implementation plans and right assurance measures focused on progress and outcomes.</li> <li>• Assess feasibility of scaling up local prevention-focussed projects by using data and intelligence</li> <li>• Maximise use of Public Health Team expertise around health promotion, research and intelligence.</li> <li>• Public health to build on existing capacity and skills to lead health improvement work across all partners, including development and understanding of the JSNA to ensure it is up to date, owned by the HWB and used to inform transformation.</li> <li>• Ensuring HWB has up to date implementation plans and right assurance measures focused on progress towards priorities and outcomes being achieved.</li> <li>• Ensure right assurance measures are in place to deliver the JHWS.</li> <li>• Maximise use of Public Health Team expertise around effective governance and risk management.</li> <li>• Better understand quality improvement by looking at information and data about primary care.</li> </ul>
<p>W- GROUP</p> <p>Board</p> <p>Working groups</p> <p>JEG</p> <p>JEG</p> <p>JEG</p>	<p><b>Theme 3: Joint commissioning and working</b></p> <ul style="list-style-type: none"> <li>• Use Joint Commissioning Group to tackle the big financial challenges and shape the wider health economy.</li> <li>• Make most of integration opportunities by developing with health partners a shared approach that supports adapting the local workforce to new ways of working</li> <li>• Join up currently fragmented commissioning arrangements.</li> <li>• Consider the immediate and long term constraints within which the CCG operates and continue to build relationships with providers.</li> <li>• Build on, and scale up, successful local projects.</li> </ul>
<p>W- GROUP</p> <p>Board</p> <p>Recommendations for Working Groups to Address</p> <p>CEWG</p> <p>CEWG</p> <p>CEWG</p> <p>CEWG</p> <p>CEWG</p> <p>CEWG</p> <p>CEWG</p> <p>JEG</p> <p>CEWG</p>	<p><b>Theme 4: Wider Engagement</b></p> <ul style="list-style-type: none"> <li>• Establish a clear, overarching narrative about the rationale for the JHWS priorities to help engage the third sector and residents</li> <li>• Establish a clear narrative on the ways in which the health and wellbeing system is being developed to meet local needs.</li> <li>• Increase ‘visibility’ of Board so it is seen as the primary strategic forum.</li> <li>• Better communicate the Board’s progress and effectiveness – particularly delivery of JHWS</li> <li>• Have ‘conversations’ with the public around a shared understanding of personal responsibility for health and wellbeing.</li> <li>• Have conversations with the public around the support available for vulnerable groups and individuals</li> <li>• Ensure Members’ have a good understanding of the health agenda to enable them to talk to their communities about changes in health and social care and ensuring the messages from public are captured and considered</li> <li>• Language and style of Board communications to be adapted to make more accessible to a wider audience</li> <li>• Further engagement with health organisations to maximise opportunities for people to improve their health through the use of learning resources</li> <li>• Use ‘Streets Ahead’ for more contact with general practice surgeries to better identify early support to families.</li> <li>• Further engagement of general practice surgeries would improve promotion of the self-referral pathway for dementia and use of the dementia advocacy service (building on the positive work already in place for adults with a learning disability).</li> <li>• Build upon community based work, such as ‘Streets Ahead’, to create more self-sustaining communities.</li> </ul>