

Councillor Moyies, Chair of the Health and Wellbeing Board  
Rob Tinlin, Chief Executive, Southend-on-Sea Borough Council  
Dr José Garcia, Vice Chair of the Health and Wellbeing Board  
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Dear James, Rob and José

### **Southend Health and Wellbeing Peer Challenge – follow up: 21<sup>st</sup> & 22<sup>nd</sup> July 2015**

On behalf of the peer team I would like to say what a pleasure it was to be invited back to Southend as a follow up to the January 2014 health and wellbeing peer challenge as part of the Local Government Association (LGA) Health and Wellbeing System Improvement Programme. This programme is based on the principles of sector-led improvement, i.e. that health and wellbeing boards will be confident in their system-wide strategic leadership role and have the capability to deliver transformational change, through the development of effective strategies to drive the successful commissioning and provision of services, to create improvements in the health and wellbeing of the local community.

The following members from the original peer team returned for the two day peer challenge follow up:

- Caroline Tapster, Director, Health and Wellbeing Improvement Programme, LGA
- Councillor Dale Birch, Chair of the Health and Wellbeing Board, Bracknell Forest Council
- Juliet Hancox, Chief Operating Officer, NHS Coventry and Rugby Clinical Commissioning Group (CCG)
- Kay Burkett, Programme Manager, Local Government Association

### **Scope and focus of the follow up to the peer challenge**

The framework for the two day follow up was the following questions:

- What progress has the HWB made since the initial peer challenge (January 2014)?
- What further improvements can be made to ensure the HWB reaches its full potential?
- What is the appetite for the HWB to become the primary strategic vehicle for system transformation?

- Are there any obstacles to achieving this?
- What would board members personally do to make this a reality?

A confidential survey was conducted with board members prior to the on-site days of interviews and focus groups to help gather a wide range of individual observations and reflections. The peer team also read key documents and looked at local data and information.

It is important to stress that this was not an inspection. Peer challenges are improvement focused. As peers we used our experience and knowledge to reflect on the information presented to us by people we met, things we saw and material that we read.

This letter provides a summary of the peer team's findings. It incorporates the feedback presentation delivered by the team at the end of their on-site visit. In presenting this feedback, the team acted as fellow local government and health officers and members, not professional consultants or inspectors. We hope this recognises the progress Southend-on-Sea's Health and Wellbeing Board has made during the last eighteen months whilst stimulating debate and thinking about future challenges and opportunities.

### **Headline messages**

We were very impressed by the engagement from all relevant partners across the HWB system in Southend to the peer challenge follow up. It was clear to our team that collectively there is enthusiasm and commitment to improving health and wellbeing of residents. This is particularly evident in the way staff have been empowered to embrace opportunities for innovation, such as the Big Lottery Fund award of £40m over ten years to invest in better outcomes for early years through "A Better Start" programme and being selected to be one of the Health and Social Care Integration Pioneers.

There is support for the new HWB chair who is keen to provide strong leadership for the health and wellbeing improvement agenda alongside the CCG lead who is the new HWB vice chair. It is important that this relationship is enhanced further so that these two key partner bodies work hand in glove as effectively as they can.

Whilst partner relationships have continued to develop progress has not been as rapid as anticipated at the last peer challenge in January 2014. This has been in part due to significant political and organisational change over the past 18 months with three different HWB chairs since January 2014 as well as other new board members such as a new Chair of Southend CCG, a new Chief Executive of Southend Hospital and new elected member representatives.

Attention must be paid to developing the board as a health system board rather than as it is viewed at the moment a "council committee". The number of elected members on the board needs to be considered in terms of the actual value they can deliver to the board and those that do remain on the board will need training in the role.

The health and wellbeing strategy refresh 2015-2016 has established “Broad Impact Goals” of prevention, addressing inequality and sustainability through personal responsibility and participation. These broad principles complement the existing nine priorities and provide a focus for operational implementation of the strategy.

You will face further challenges as a health system with significant pressures in terms of finance and future demographic trends. For example, your projections are for a significant increase in terms of both elderly and frail residents. As a consequence you will need a strong, focused and integrated HWB to plan for and respond to this challenge. One of the key responsibilities of the HWB is to ensure an accurate and up to date Joint Strategic Needs Assessment (JSNA) is available that is easily understood by all partners and interested agencies so as to ensure a sound base for commissioning decisions. Greater focus on the JSNA needs to be made and once the JSNA has been updated it will be important that priorities beyond 2016 are agreed using the JSNA as the main basis for commissioning priorities against which all procurement decisions can be measured.

The pre-discussions at board meetings have helped to explore wider issues but the HWB needs to ensure it can prioritise its agenda to focus on the big ticket items such as pressures in the system, health inequalities, quality and access in primary care and health reconfiguration.

### **What progress has the HWB made since the initial peer challenge?**

The peer team noted the following as key areas of progress since the initial peer challenge in January 2014:

- Integrated Commissioning Team set up
- Data sharing for direct care (UK first for patient records) & commissioning
- Jointly managed Better Care Fund (BCF)
- Fulfilling Lives - A Better Start initiative for families with young children and the HWB as a strategic vehicle for early years
- Single Point of Referral (SPOR) further developed
- Older People Strategy being consulted on
- System redesign – e.g. Community Recovery, End of Life pathways
- Refreshed JHWS for 2015-16
  - partners signed up
  - summary on a page
  - draft performance indicators
  - new reporting template
  - engagement event

### **What further improvements can be made to ensure the health and wellbeing board reaches its full potential?**

Based on where the HWB is currently, and taking into account research on the boards that are ahead of the curve in making progress, the peer team offer the suggestions below as areas for further development.

- The HWB to continue to invest in new ways of working by using developmental sessions to develop trust and collaboration to ensure it operates as a board and not a council committee.
- Create firm foundations so the agenda will go forward even when individuals change, this includes continuing to have conversations outside of board meetings.
- Develop a stronger narrative based on a shared and agreed intention about the ambition for Southend. Use the narrative as a basis for the HWB to be more outward looking and develop a joint strategy for community engagement.
- Ensure there is a more strategic focus for the HWB and its agenda is reduced to attend more proactively to the main issues facing Southend, the place and people.
- Build on momentum to keep partners engaged so the HWB can fulfil its role in driving change and unblock obstacles in the system.
- Enable the HWB to develop a common understanding of health inequalities and where health outcomes are poor; agree what needs to be addressed and ensure partners are focused on addressing them collectively and being less protective of their own services and organisations.
- Integrated governance route needs to be streamlined so there are clearer arrangements for reporting on progress, quality and performance

**What is the appetite for the HWB to become the primary strategic vehicle for system transformation? Are there any obstacles to achieving this? What would board members personally do to make this a reality?**

It was self-evident that the range of partners we spoke with have unequivocal co-ownership of the strategy. Some have less co-ownership of the board and going forward both together will be required if you are to be a successful system leader.

Understanding each other's needs and constraints is key to a successful board. At different times each organisation represented at the board will have different pressures and challenges. It will be mission critical to your progress to share this knowledge and awareness as it will inform you about your strength and resilience and importantly, capacity.

Instil pace and confidence through tackling key challenges in partnership. Consider having in place a range of quick wins, medium term projects, with an eye on the longer term ambition to enable new board members to develop their shared sense of purpose and direction.

We felt it was very important to focus on what the board is and what it is not. It should become the primary strategic forum for driving improvement in the health and wellbeing system it is not a scrutiny committee and partners, elected members in particular, should not seek to use it as such. Inevitably it has focussed on the Better Care Fund (BCF) and also in part suffered from being seen as a useful place to report progress to on a range of issues. It has to be more than that now and a refocus on purpose will help the board refresh itself. This should include being clear of its positioning in relation to wider partnership structures.

After so much 'churn' in the system the time is right to develop a collective understanding of what only the board can or should do. This is about strategically positioning the board and also seeing it as a collective not just a range of partners coming together. From the conversations the peer team were involved in there is clearly a commitment from board members to 'getting it right' for Southend.

### **Next steps**

The Council, CCG and members of the HWB will undoubtedly wish to reflect on these findings and suggestions before determining how the system wishes to take things forward.

Gary Hughes Principal Adviser, East of England is the main contact between your authority and the Local Government Association. Gary can be contacted at [gary.hughes1@local.gov.uk](mailto:gary.hughes1@local.gov.uk) , tel. 07771941337 and can provide access to our resources and any further support.

In the meantime, all of us connected with the peer challenge follow up would like to wish you every success going forward. Once again, many thanks to everyone involved for their participation.

Yours sincerely

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On behalf of the peer challenge team