

Blackburn with Darwen Health and Wellbeing Board

Development Agenda

February 2011

1. Purpose

It is clearly vital to develop an approach to the Blackburn with Darwen Health and Wellbeing Board (BwDHWB) which reflects the needs of BwD, within the prescribed national framework. It will also be important to clarify key issues of roles, responsibilities, governance, management, transition (from CT Plus Board), relationships, reporting, performance, accountability, agenda setting, and scrutiny. Collectively these issues will form part of the HWB 'Development Agenda' defined in this paper.

They can be separated into 'reference questions' (to do with the wider understandings of the terms of reference) and 'strategic, tactical and operational questions' (to do with how the HWB will actually do its work and what that work should be).

2 Key Reference Questions

In order for the BwD HWB to operate effectively there are some key reference questions that require discussion by members (in the light of national guidance). The results of agreements arising from these discussions will then need written codification as an appendix to the 'Terms of Reference'. The BwD HWB will need to seek clarity on these before commencing full operation.

These questions include:

- 1 What are the statutory roles and responsibilities of the Board?
2. What are the statutory responsibilities (and liabilities) of Board members?
3. Who is the Board accountable to?
4. What is the boards business?
5. Who sets and controls the Boards agenda
6. What are the relationships between the Board and:
 - Department of Health
 - The NHS Commissioning Board
 - The PCT Cluster
 - Monitor and CQC
 - The GP Commissioning Consortia
 - The Local Authority Executive Board
 - The Local Health Scrutiny Committee
 - Lancashire Health Scrutiny Committee
 - Provider Services including Foundation Trusts.
 - Staff employed within the health economy
 - Local Health Watch
 - Others?
7. Who is accountable to the Board and what sanctions does the Board have?
8. How should the Board report to the public it serves and other statutory bodies?

9. What reporting mechanisms should the board adopt?
10. What performance measures should the Board adopt to monitor its own performance?
11. Who should set the Boards agenda and how should this be managed?
12. What style of operation should the Board have?
13. How will the Board manage the transition of business from CT Plus Board between January 2011 and April 2013?
- 14 Who services the administration of the Board?

3 Strategic, Tactical and Operational Questions

In addition to the key reference questions detailed above, the BwD HWB will need to give some thought to a range of strategic, tactical and operational considerations. These may include:

1. What is the wider role of the HWB in addition to the statutory requirements?
2. What expectations should we have for the HWBB; what are the priorities and what are the challenges?
3. Should the Board
 - have a role in whole system leadership and change – (transformational outcomes, not simply organisational change) ?
 - be prioritising investment (and disinvestment) and interventions to tackle health inequalities, particular health improvement aims and priority localities?
 - have an objective of increasing collaboration and integration, not simply better partnership working, or information sharing?
 - be setting the strategy and commissioning outcomes across all sectors?
 - Challenging partners and holding them to account at a strategic level above BwD (e.g Department of Health, NHS Commissioning Board)?
 - Influencing/commissioning the widest range of services – the wider determinants of health, not just health and social care?
 - Seeking better value from the system (eg: incorporating QIPP)
4. How will the Board:
 - ensure that the HWBB does not become bogged down in detailed commissioning or performance management
 - ensure public visibility and make it real for local people?

- How can the HWB engage residents, patients, carers in the HWB agenda eg: user friendly JSNA, priority setting for the HWB Strategy?

5. How will the Board be involved actively in the JSNA which will be the key planning document for the HWB, leading to the development of the HWB Strategy.

6. What should be the scope and purpose of the JSNA and how will it be different from now? For example:

- should it describe the total health and well being needs of the area – should this also include safer communities, environmental issues, stronger communities etc?
- Be strongly evidence based about interventions that work and those that have not
- Strongly focus on the needs of different places, not just client groups eg: analysis across localities

7. How will the Board define a HWB Strategy and what will it achieve? For example:

- Should it describe the total health and well being needs of the community (and the different needs of the localities)
- How will this differ from the sustainable community strategy?
- How will ownership for delivery across the sectors be ensured ?

8. How will the HWB link to the LSP and its other thematic groups?

9. Should the BwD HWB be actively offering itself as a forum for other neighbouring Local Authorities?

10. How will the BwD HwB deal with out of borough/ county issues that we need to address as part of the role of the HWBB?

11. How will the HWB ensure increased pooling of budgets to address shared priorities?

12. Should the HWBB oversee the ring fenced health improvement budget (the Director of Public Health will be accountable)

13. Delivery: there is little point in joining up needs analysis and planning if commissioning and delivery are not also joined up. How can this be achieved ? For example:

- A HWB Commissioning Team that supports the HWBB?
- Integration of commissioning teams, linked to the new role for the local authority in supporting the GPC as CT+ is phased out
- Integration of local delivery across the areas
- Organisational development interventions to support learning together and working together

14. How can the Board tap into work on increasing self reliance and behavioural change and what will be the role of Heath Watch in this?

3. Development programme

It is recommended that the development agenda defined above is worked up into a BwD HWB Development Programme for 2011. This programme will require expert facilitation and additional organisational development resource.

Dominic Harrison
BwD Director of Public Health
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