

## Suffolk Health and Wellbeing Board

*A committee of Suffolk County Council*

<b>Report Title:</b>	Joint Health and Wellbeing Strategy – Priorities for Action
<b>Meeting Date:</b>	10 March 2016
<b>Chairman:</b>	Councillor Alan Murray
<b>Board Member Lead(s):</b>	Tessa Lindfield, Director of Public Health & Protection, Suffolk County Council
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### **What is the role of the Health and Wellbeing Board in relation to this paper?**

1. The Joint Health and Wellbeing Strategy (JHWS) sets the long term strategic framework for improving health and wellbeing in Suffolk. There are four outcomes, each having three or four priority areas. Most of these outcomes have a system wide strategy agreed which is monitored by a subgroup of the HWB and for some of these strategies there over 20 “areas of focus.”
2. The recent Health in All Policies peer review (HiAP) suggested that Suffolk had too many system wide priorities and that the Health and Wellbeing Board (HWB) should focus on a smaller number of joint priorities to ensure the JHWS outcomes were delivered. This paper suggests a process that could result in an agreed set of key priorities for the HWB to sponsor. The priorities would be those that are complex and require the members of the HWB to commit the resources of their organisation to the delivery of the agreed outcomes.

### **Key questions for discussion:**

3. The key questions for discussion are:
  - a) Do the Board members agree with the HiAP review that there are too many areas of work across the system that are considered HWB priorities?
  - b) If yes, is the process outlined in the paper an acceptable way for the Board to agree a set of key priorities for which it will take ownership across the system?
  - c) How many priorities is reasonable for a Board member to pledge support for from their organisation?

## **What actions or decisions is the Board being asked to take?**

4. Board members are asked to:
  - a) Agree that a smaller number of system wide priorities will be agreed by the Board for which it will take ownership.
  - b) Agree the process suggested in the paper as a way of the Board agreeing those priorities and where responsibility lies for delivery of outcomes.

### **Brief summary of report**

5. The HiAP peer review formal feedback will be received in March and will be discussed at the May Board. Preliminary feedback stated that the Board would benefit from focusing how it can use its leadership role to support the delivery of the outcomes of the JHWS and be clear about accountability for those outcomes. It suggested that currently the Board had too many priorities with too broad a focus.
6. The Board is due to agree priorities for the refreshed JHWS and it is therefore timely to consider these preliminary findings, which were based on feedback of those working in the system including members of the HWB.
7. This paper proposes a mechanism for the Board to focus on the delivery of a small number of priorities in 2016/17 and still be confident that the system is delivering the JHWS outcomes as part of core business.

### **Main body of report**

#### **Background**

8. The preliminary feedback from the HiAP peer review was that there was enthusiasm among partners for system wide working but that the HWB needs to be clearer about:
  - its particular role within system wide transformation;
  - how it can use its leadership role to support the delivery of the outcomes in the JHWS;
  - the specific priority actions it wishes to focus upon - it was felt that currently there were too many;
  - where the accountability rests for the delivery of the outcomes and the strategies that it adopts.
9. The HWB has a principle of delivering the JHWS through embedding delivery in the core business of its membership. However it is not practical for the Board to receive, debate and inform the detailed delivery of actions plans for all joint work across the system which will contribute to achieving the aims of the JHWS. Yet the Board needs confidence that impact is being made and that any risks or issues are being escalated.

#### **Priorities for Action**

10. It is suggested that the board has an agreed model for delivery of the JHWS outcomes. A suggested model is:

- That each outcome is underpinned by an agreed Board strategy or action plan which will outline how the outcome will be delivered by the system. Outcome 1 will be delivered through the Family 2020 Strategy, Outcome 4 by the Mental Health strategy and the part of outcome 2 relating to Learning Disability through the strategy agreed by the Board. However, there is no agreed plan for delivery of the part of outcome 2 relating to physical disability or for outcome 3.
- The delivery of these strategies should be considered core business by the Board Member organisations and will be coordinated and monitored by an appropriate group. This would be the forum where the system engages in the detail which answers the question of accountability. The groups will also identify those areas that would most benefit from the involvement of the HWB for successful delivery of outcomes. The forums currently overseeing delivery are indicated in Table 1 below but there is currently no formal mechanism for system wide delivery for outcome 3 or the part of outcome 2 relating to physical disability.
- The Board will be presented with a regular overview of the activity and impact made by the four groups identified as responsible for delivery of the JHWS outcomes. Each forum would be given the opportunity to suggest to the Board up to four priorities it would like the Board to sponsor. These will be selected on the basis that it will require proactive system wide engagement and a clear role for the Board which enables it to focus on where it can add value most.
- Table 1 below provides a summary of the system wide forums which would be best placed to take on responsibility for delivering each of the four outcomes adopted by the Board as part of the JHWS refresh. The table also identifies the plan or strategy which would underpin the delivery.

Table 1: Health and Wellbeing Board priorities

JHWS Outcomes	Current formal delivery mechanism	System wide plan/strategy	Cross Cutting theme			
			Embedding Prevention	Addressing Inequalities	Health and Care integration	Stronger Resilient communities
Every child in Suffolk has the best start in life	Children's Trust Board	Family 2020 Strategy*	Aspiring to a tobacco free Suffolk	Groups At Risk of Disadvantage	Better Care fund	Volunteering Strategy
Improving independent life for people with physical and learning disabilities	Joint Commissioning Group (JCG) for Mental Health, Learning Disability and Substance misuse.  Nil for Physical Disability	LD strategy	Reducing demand in the health and care sector by improving health : a prevention strategy for Suffolk*  Suffolk Housing and Health Charter		Connect Sudbury Connect Ipswich Sustainability Transformation Plans*	Poverty Strategy
Older people in Suffolk have a good quality of life	No formal group – informal Outcome 3 group exists	Dementia Friendly communities	Suffolk Alcohol Strategy  Suffolk Walking			

People in Suffolk have the opportunity to improve their mental health and wellbeing	JCG for Mental Health, Learning Disability and Substance misuse.	Mental Health strategy	Strategy Suffolk Cycling Strategy Physical Activity Strategy Suffolk Nature Strategy			
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*\*to be formally agreed by the Board in May.*

13. A review of the plans and strategies which have been adopted or ratified by the HWB has also been undertaken and allocated to one of the four cross cutting themes (shown on Table 1). The cross cutting theme champions and supporting officers would be responsible for co-ordinating activity to ensure that the stated outcomes are being delivered as well as ensuring that they are contributing to the plans and strategies of the four JHWS outcomes. The cross cutting theme leads would therefore be responsible for reporting to the Board on this activity.
14. If this is accepted, the Board needs to consider the lack of an underpinning strategy and forum to co-ordinate and support the delivery of outcome 3 relating to older people and those with physical disabilities which forms part of outcome 2.
15. If this approach is agreed there is also need to consider whether the forums identified have sufficient support and engagement from the HWB member organisations to deliver the strategies.
16. It is suggested that a decision on HWB priorities will be made at the May Board following engagement with the forums identified above.

### **Why this action/decision is recommended**

17. The proposal is a mechanism to allow the Board to confirm its priorities whilst giving it confidence that the core business of partners will continue to deliver the wider JHWS outcomes

### **Alternative Options**

18. The Board could suggest a different approach, which would include each outcome lead producing additional action plan/ strategy and separate monitoring reports.

### **Who will be affected by this action/decision?**

19. Suffolk residents.

### **Sources of further information**

Agenda Item 5, Health and Wellbeing Board 28 January 2016: Joint Health and Wellbeing Strategy refresh 2016 – 19:

[Covering Report](#)

[Appendix 1 - Outcome and Cross Cutting Theme Leads Flowchart](#)

[Appendix 2 - Refresh Document](#)