

## **Shadow Staffordshire Health and Wellbeing Board: Your Questions Answered**

### **Introduction**

The health and general wellbeing of Staffordshire's population is determined mainly by the lifestyles and life choices of individuals.

But there are many other determining and influencing factors... from housing, transport, leisure and employment opportunities to community safety, education, health, social care and voluntary sector services. Each and every one can make a positive, or negative, difference to the future of our population's wellbeing..

Seeing all those things collectively, as a whole 'system' or place, is a massive challenge.

Finding the balance between the different organisational needs of individual public sector bodies versus what is best for the wider population and local areas is tough. Aligning what we do across those different autonomous bodies and ensuring clear responsibility, both locally and countywide, is the biggest challenge. But doing that better than we've done it before is the biggest prize and will also result in the most significant short term and long term improvement to the wellbeing and quality of life for Staffordshire people.

The Health and Wellbeing Board is an amazing opportunity to do that better by bringing together the main strategic fund holders and decision makers. It's about collectively agreeing what we should focus on and ensuring a collaborative approach across different services and functions that can contribute to people's general health and wellbeing.

In short, it's about aligning efforts across different organisations to deliver agreed health and wellbeing outcomes for local communities and individuals across Staffordshire in a way which has not been done before. And although it isn't a quick fix, now is the time to embrace a fundamentally different way to do things. The environment is right!

Financially, the pressures we all face provide opportunities for better collaboration and more effective ways of doing things and proposed legislative changes around public health, clinical and wider commissioning, mean new clarity to help get our collective ducks in a row.

While the new arrangements provide an excellent opportunity, they also raise many questions about what this means in reality.

We've tried to answer some of the questions below - if you want to know anything which is not answered please get in touch (through emailing [denise.vittorino@staffordshire.gov.uk](mailto:denise.vittorino@staffordshire.gov.uk)) and we will do our best to help.

Remember though that we are in the early stages of developing this different way of working. This factsheet will be updated as the work of the shadow Staffordshire Health and Wellbeing Board evolves and develops.

The questions have been ordered thematically. For the definitions of the abbreviations used please see question 18.

## **Background**

### **1. Why establish a Staffordshire Health and Wellbeing Board?**

Across the country the health and care system and services which affect the wider wellbeing of the population are delivered and influenced by many autonomous public bodies which have organisational responsibilities as well as wider responsibilities to their populations. Often those split responsibilities are troublesome and can even conflict leading to a dislocated and sometimes insular approach.

Whilst in Staffordshire progress has been made to break down those barriers the HWB will enhance this further and place delivering outcomes for local people centre stage. It will help by providing a formal but simple structure with clearer focus for organisations to deliver on their wider responsibilities collectively rather than being insular.

The Health and Social Care Bill 2011 makes the establishment of a Health and Wellbeing Board mandatory for upper-tier authorities and provides statute that underpins the work ongoing in Staffordshire while enhancing further the focus on joint working across the NHS, Social Care and wider services.

It provides democratic accountability as well as a greater focus on the general wellbeing of individuals. That means involving wider public services, such as community safety, transport, leisure and the voluntary sector which can enhance general quality of life and therefore the wellbeing of Staffordshire's population.

In future GPs will be responsible for commissioning more services directly and that fundamental change nationally creates brand new opportunities to align efforts across more services that can influence or determine health and general wellbeing.

### **2. What is a Health and Wellbeing Board?**

The HWB brings together in one place the key strategic budget holders and decision makers... County Cabinet Members and a District Cabinet Member representing all eight local councils, Healthwatch representative, Commissioners of health and social care, including GPs who will commission care through Clinical Commissioning Groups instead of PCTs.

### **3. What is the purpose of the Staffordshire Health and Wellbeing Board?**

The HWB is fundamental to our collective efforts to bring greater synergy to health and social care services and improving collaboration across the whole health and social care sector. It will drive improved outcomes for the people and communities of Staffordshire.

It will bring strong democratic accountability to health services and commissioning and drive the development of the statutory Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies. These strategies are critical and will be the 'backbone' to be our collective approach across Staffordshire.

The HWB will provide strategic leadership across the whole health and social care sector including the NHS, Social Care, Public Health and other local services. The HWB is about pulling all the individual parts together.

#### 4. What are the HWB's priorities?

It has responsibility for overseeing and influencing the delivery of one of the Staffordshire Strategic Partnership's priority outcomes, that is: '*Staffordshire will be a safe, healthy and aspirational place to live*'. Underpinning this outcome are three agreed priorities where partnership working can have the greatest impact:

- Reduce the impact to the individual, community and society caused by alcohol misuse;
- Positively supporting and planning for the growing ageing population;
- Reduce crime and the fear of crime.

The HWB will identify further evidence-based outcomes and priorities and, once agreed, they will be included in the Terms of Reference for the Board and in future updates to this document.

#### 5. What responsibilities does the HWB have?

The HWB has a number of ongoing responsibilities, these are to:

- provide local democratic accountability
- ensure the voice of the community is influencing decisions
- deliver the Staffordshire Joint Strategic Needs Assessment
- deliver the Joint Health and Wellbeing Commissioning Strategy for Staffordshire
- oversee the effective delivery of the Staffordshire strategic priority outcomes
- drive joint commissioning and integration of health and social care services
- evaluate and review the impact made, including public and patient involvement
- assess with a view to endorse the Clinical Commissioning Group Commissioning Plans
- collaborate with the Health and Wellbeing Board for Stoke-on-Trent on relevant issues

It will establish sub-groups comprising a range of stakeholders to ensure that these functions are undertaken effectively.

#### 6. When will the HWB be up and running?

The Shadow Staffordshire Health and Wellbeing Board met for the first time on 6 October 2011 and is now up and running.

Staffordshire is an 'early implementer' this means that we are committed to pace and ensuring we can move things forward as soon as possible. It provides us with an opportunity to get the mechanisms in place early, so we can get on with making a real difference to the health and wellbeing of local people through working together.

Once the legislation is passed, the shadow Staffordshire HWB will change to the Statutory Board with legal responsibilities (expected to be April 2013). But we can embrace the principles of the new way of working much sooner than that.

## Practicalities

The HWB is made up of decision makers from across strategic bodies that are key influencers to health and wellbeing outcomes across Staffordshire. Collectively it is an immensely influential group with the potential to deliver fundamental improvement. The Chair is appointed by the leader of the County Council. When the HWB progresses from shadow status to statutory form it will become a formal committee of the County Council.

### 7. Who are the members of the shadow Staffordshire HWB?

The membership of the HWB is lean but includes the statutory requirements (outlined in the Health and Social Care Bill 2011) adapted to meet the needs of Staffordshire:

Matthew Ellis (Chair)	Cabinet Member for Adults Wellbeing, Staffordshire County Council
Mike Lawrence	Cabinet Member for Children's Wellbeing, Staffordshire County Council
Robbie Marshall	Cabinet Member for Public Health and Community Safety, Staffordshire County Council
Mary Oates	Tamworth Borough Council Cabinet Member (representing District and Borough Councils)
Tim Berriman	Representative of Southern Staffordshire Clinical Commissioning Groups
Steve Powell	Representative of Southern Staffordshire Clinical Commissioning Groups
David Hughes	Chair of North Staffordshire Clinical Commissioning Group
Michael Cunningham	Chief Constable, Staffordshire Police
Aliko Ahmed	Joint Director of Public Health Staffordshire
Graham Urwin	Chief Executive of the Staffordshire PCT Cluster
Eric Robinson	Director for People and Deputy Chief Executive, Staffordshire County Council
Will Taylor	Representative from the Local Involvement Network (LINK) (HealthWatch when constituted)

When will the Board meet?

The Board met for the first time on 6 October 2011 and will meet every 6-8 weeks and sooner in the early stages.

8. What information will the Board use to make decisions and identify priorities?

The JSNA provides a detailed assessment of need for each district across Staffordshire. The HWB will use the JSNA to develop the JHWS both of which will be used to inform the decisions of the Board and identification of priorities. The public's view will be at the centre of shaping the future of services.

9. Does the HWB have a budget?

It does not have its own budget but collectively the budget around the HWB table is nearly £3billion.

10. How will the Board be held to account?

The HWB has developed its Terms of Reference which set out Governance and Accountability arrangements:

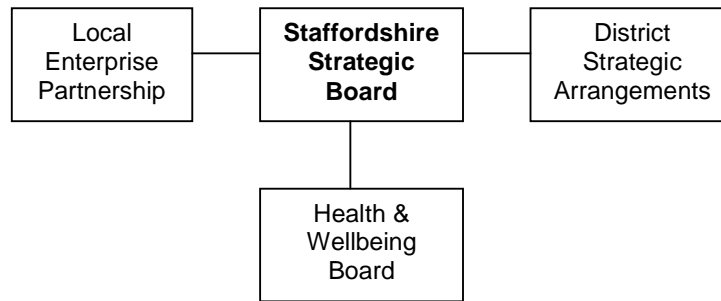
- It will link into the Staffordshire Strategic Partnership (SSP) as the overarching partnership body for the county. The Chair of the HWB sits on the wider SSP Board.
- As a committee appointed by the County Council the HWB will be subject to scrutiny by the County Council's overview and scrutiny arrangements.
- It is expected that Members of the HWB will have delegated authority from their organisations/sector to take decisions within the Terms of Reference. Each will be accountable through their own organisation's decision making processes for the decisions they take.
- The HWB will produce an annual report setting out the difference that it has made to the health and wellbeing of local people. There are two key audiences for this work, wider stakeholders and local people themselves.

**Structure & Sub-groups**

11. How will the Board link in with the Staffordshire Strategic Partnership?

The Board will link into the Staffordshire Strategic Partnership (SSP) as the overarching formalised partnership body for the county. The Chair of the Board will sit on the wider SSP Board.

## Staffordshire Strategic Partnership Structure



The SSP has identified two priority outcomes, which it has agreed are important for Staffordshire people and place, with a particular focus on those issues where we can have the biggest impact through partnership working.

These are:

- Staffordshire will have a thriving economy, and
- Staffordshire will be a safe, healthy and aspirational place to live

The Staffordshire Health and Wellbeing Board has responsibility for overseeing the delivery of Outcome 2 'Staffordshire will be a safe, healthy and aspirational place to live'. Underpinning this outcome are three priorities:

- Reduce the impact to the individual, community and society caused by alcohol misuse;
- Positively support the ageing population;
- Reduce crime and the fear of crime.

The Board will develop further outcomes and priorities, once these are agreed they will be updated here and included in the Terms of Reference.

### 12. Will the Board establish any sub-groups?

The Board will establish sub-groups comprising a range of stakeholders to ensure that its functions are undertaken effectively. The sub-groups will be designed to enable 'all age' commissioning.

## Communication and Engagement

### 13. How will the Board ensure inclusivity of stakeholder views in the development of the Board?

The Board will be holding a stakeholder event in late 2011 to which stakeholders will be invited to hear about progress to date and engage in discussions about the way forward in delivering priorities.

14. How will the Board communicate with wider stakeholders about developments?

Work is also taking place on identifying how we can best communicate with partners on an ongoing basis. This includes developing a web page with key information about the work of the Board and its progress.

**Further information**

15. How can I find out more about Health and Wellbeing Boards and the modernisation of health and care?

The Department of Health (DH) has produced a series of factsheets explaining the key themes of the Health and Social Care Bill. These can be accessed from:

<http://healthandcare.dh.gov.uk/factsheets/>

The DH and Local Government Group have set up a National Learning Network to share learning across the country. As part of this they have established a virtual learning hub, hosted through the Communities of Practice. You can join and contribute to the National Learning Network for Health and Wellbeing Boards from: <http://tinyurl.com/6jlmmtg>

16. What do all the abbreviations mean?

We have compiled a list of some of the most common abbreviations associated with the Health and Wellbeing Board:

CCG	Clinical Commissioning Group
HWB	Health and Wellbeing Board
JHWS	Joint Health and Wellbeing Strategy
JSNA	Joint Strategic Needs Assessment
SSP	Staffordshire Strategic Partnership