

Leading Healthier Places 2020/21

Purpose of report

For information.

Summary

This paper outlines the current and proposed future activity of the Health and Wellbeing System Improvement offer. Community Wellbeing Board members are asked to consider if at this time there is any further support which would be welcome.

Recommendations

Community Wellbeing Board to note the updates contained in the report and provide any feedback

Actions

As directed by Members.

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Leading Healthier Places 2020/21

Background

1. Health and Wellbeing Boards (HWBs) are statutory forums where political, clinical, professional and community leaders from across the care and health system come together to improve the health and wellbeing of their local population and reduce health inequalities. They have been in place since 2013 and are a single point of continuity in a constantly shifting health and care landscape. Since their creation, the context in which HWBs operate has become more pressured and complex. They have had to deal with a rapidly changing health landscape, changing national priorities for health and wellbeing and an increase in the demand for health, social care and public health services due to demographic and financial pressures. This year, the LGA has produced 'what a difference a place makes', evidencing the positive impact HWBs are having.

Issues

2. Effective leadership of HWBs is crucial in ensuring that the political, clinical and community leadership of each place owns and supports the implementation of local plans for place-based and person-centred care and support to improve health and wellbeing outcomes and address health inequalities. The LGA, working with partners such as NHS Clinical Commissioners (NHSCC) and the Association of Directors of Public Health (ADPH) provides flexible Health and Wellbeing System Improvement support, which has continually adapted, and increased its impact over this time. This support is part of the wider Care and Health Improvement Programme run collaboratively with Association of Directors of Adult Social Services (ADASS).
3. Over the past five years we have supported HWBs in the following ways:
 - 3.1. 175 elected members and 50 GPs have participated in HWB residential Leadership Essentials programme, which also provides a gateway to access further support
 - 3.2. Annual summits for political and clinical leaders in care and health - in March 2019 we delivered our fifth, most positively evaluated and best attended summit
 - 3.3. Bespoke support to 25 HWBs or health and care systems in 2017/18, 26 in 2018/19, and 20 so far in 2019/20
 - 3.4. Over the past three years delivered 49 facilitated integration leadership workshops, which help health and local government leaders to identify the progress they have made and the challenges they face in moving to a person-centred and place-based system
 - 3.5. Delivered 18 new system-wide care and health peer challenges in the last three years
 - 3.6. Delivered over 55 prevention matters training days for elected members since autumn 2016
 - 3.7. Supported regional networks of political and clinical leaders e.g. Chairs Network in the West Midlands

3.8. Further improvement activity, including Health in All Policies peer support and When Worlds Collide workshops.

4. Future activity: support offer 2020/21

4.1. In December, Secretary of State for Health and Social Care Matt Hancock, referred to the "...need to make the 2020s a decade of prevention...". HWBs are uniquely placed to set a long-term prevention vision for the place through their statutory basis, democratic accountability, roots into and knowledge of the local community and links to the wider determinants of health.

4.2. HWBs have a pivotal role in leading health improvement and prevention in the place and in tackling health inequalities and the population health agenda is an opportunity for HWB engagement with NHS Local Plans and Integrated Care Systems (ICSs).

4.3. The context for HWBs remains complex, challenging and changing. The greatest demand from HWBs for our bespoke support last year was re-assessing their role with a focus on the wider determinants of health and health inequalities.

4.4. This year we plan to focus our leadership support for HWBs, elected members and clinical leaders on prevention – "Leading Healthier Places"

4.5. We plan to continue to:

4.5.1. use our tried and tested methods and interventions

4.5.2. deliver most activity through tailored, flexible and responsive support to place

4.5.3. support ADPH regions.

4.6 We plan to develop an offer to address inclusive growth issues with a wider range of partners. This will draw on the explicit links between health and the local economy, their interdependence, and the actions that HWBs and partners can take to ensure that health and wellbeing are key considerations in local and regional economic development strategies, including the role of anchor institutions.

4.7 Outcomes: what we are trying to achieve:

4.7.1 HWBs engage effectively on population health with the ICS/STP at system level

4.7.2 HWBs lead on the wider determinants of health and create the opportunities to further health improvement and reduce health inequalities

4.7.3 HWBs work across boundaries with each other to improve their effectiveness/influence

4.7.4 The contribution of council's public health provision and influence on the wider system is recognised

- 4.7.5. High performance in public health is supported.
- 4.8 Support for HWBs and place based political and clinical leaders - individual leadership:
 - 4.8.1 Induction for new HWB Chairs, Vice Chairs and Lead members 16 June 2020
 - 4.8.2 Leadership Essentials 2-day residential session in the Autumn
 - 4.8.3 Prevention Matters – one day workshop for all council elected members on site (districts, group of councils)
 - 4.8.4 Regional leadership networks – with NHS partners e.g. West Midlands.
- 4.9 Support for HWBs and other leadership partnerships:
 - 4.9.1 Tailored support to HWBs to review their role in leading healthier places and engaging effectively with partners
 - 4.9.2 “When Worlds Collide” workshops – facilitating greater mutual understanding between elected members and NHS colleagues
 - 4.9.3 Prevention Matters/plus training sessions for elected members
 - 4.9.4 Up to six system-wide care and health prevention peer challenges
 - 4.9.5 Develop support around inclusive growth, wider determinants, health inequalities, community wealth and wellbeing linking with the devolution agenda and a wider range of partners
- 4.10 Support for prevention/public health building blocks:
 - 4.10.1 Support the roll out of the public health self-assessment risk tool in ADPH regions
 - 4.10.2 Peer training for Directors of Public Health through ADPH regional networks
 - 4.10.3 Facilitated SLI workshops for ADPH regional networks
 - 4.10.4 Support to 0-19 sub-regional commissioning networks
 - 4.10.5 Mapping of tools to support implementation of ‘Quality in Public Health – a shared responsibility’ framework, and supporting roll out of the framework
 - 4.10.6 Sharing learning on how to use the JSNA and innovative ways of developing it as the core document for managing population health.
- 5. Considering Covid-19 developments, we will respond proactively and innovatively to the changing environment to ensure our support remains fit for purpose and accessible. This will consist of two key aspects:**

- 5.1. Innovatively providing support virtually e.g. webinars and sessions via Zoom, wherever possible
- 5.2. Developing support in 2020/21 responding to the emerging issues for HWBs in leading responses to Covid-19, for example sharing best practice

6. Future Activity: how should the programme develop from 2020?

6.1. This paper is seeking the views of Community Wellbeing Board members on how the support offer should develop from 2020 onwards:

- 6.1.1. How do you think the Leading Healthier Places support offer should develop over the coming years?
- 6.1.2. Do you have any personal experience and insights of the Leading Health Places support offer?
- 6.1.3. Is there anything missing from the programme?

Implications for Wales

7. Health and social care policy are devolved to the Welsh Assembly. Improvement work is provided directly by the WLGA.

Financial Implications

8. This work will be undertaken from within existing programme budgets, funded by the Department of Health and Social Care (DHSC).

Next steps

9. Community Wellbeing Board members are asked to note and provide any views to questions proposed in section 5.