



HEALTH AND WELLBEING BOARD PAPER FORMAL PUBLIC MEETING

Report of: Greg Fell
Director of Public Health, Sheffield City Council

Date: 31st March 2022

Subject: **Health and Wellbeing Board Review – Proposal for Next Steps**

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Summary:

This paper outlines the proposals for the future direction of the Health and Wellbeing Board, following a period of review and refresh carried by the Board between December 2021 and February 2022. The proposal enclosed considers changes to Health and Wellbeing Board meetings and the implications for current Board members. It provides an opportunity for the Board to reflect on the key findings from the review and comment on the proposed next steps. The key changes are:

- Maintaining formal committee meetings to fulfil statutory functions, but loading up the agenda with more intelligence, updates and change proposals and dedicating time at one of these meetings to look back at the previous year and look forward to the next;
- Replacing the current strategy development sessions with three half-day conference-style events per year, with a broader invite list, focussed on specific themes/priorities decided on by the Board; and

- The HWBB Steering Group to still meet in its current form but shift its role to being primarily about designing the conference events and making them effective and engaging, rather than forward planning.

These changes are intended to address the issues identified through the review, and to provide renewed energy, impetus and focus to the Board's work.

Questions for the Health and Wellbeing Board:

1. Do these proposals take into account the key considerations of Board members when thinking about the HWBB's future direction?
2. Do these proposals make sense in light of NHS and Council governance reforms, as well as wider contextual changes, e.g., 'living with Covid' plans, changes in Sheffield's partnership landscape?
3. Do the proposals give the urgency needed to ensure that the HWBB can have the most significant impact on health inequalities in Sheffield?

Recommendations for the Health and Wellbeing Board:

The Board are asked to:

1. Note and agree the framework for the future of the Board set out in this paper
2. Note and agree the framework for future membership, and agree to further work to identify appropriate NHS members, and members with a focus on children and young people
3. Agree to receive a final revised set of Terms of Reference for the Board at their June 2022 meeting based on these proposals, ahead of putting these to Full Council for approval and incorporation into the Constitution

Background Papers:

- HWBB Review and Refresh – Discussion Paper (*February 2022 Strategy session*)
- Health & Wellbeing Board: Review and refresh (*December 2021 Strategy session*)

Which of the ambitions in the Health & Wellbeing Strategy does this help to deliver?

All nine ambitions have been considered, with this paper relating specifically to the 'Delivering on ambitions' section of the Health & Wellbeing Strategy.

Who has contributed to this paper?

Lucy Darragh

Dan Spicer

HWBB Steering Group

All Board members

Health and Wellbeing Board Review - Proposal for Next Steps

1.0 SUMMARY

1.1 This paper outlines the proposals for the future direction of the HWBB, taking into account the key findings of those discussions. These proposals concern key changes to HWBB meetings:

- Maintaining formal committee meetings to fulfil statutory functions, but loading up the agenda with more intelligence, updates and change proposals and dedicating time at one of these meetings to look back at the previous year and look forward to the next;
- Replacing the current strategy development sessions with three half-day conference-style events per year, with a broader invite list, focussed on specific themes/priorities decided on by the Board; and
- The HWBB Steering Group to still meet in its current form but shift its role to being primarily about designing the conference events and making them effective and engaging, rather than forward planning.

1.2 The paper also outlines the implications of these proposals, and other contextual factors, on current HWBB members.

2.0 HOW DOES THIS IMPACT ON HEALTH INEQUALITIES IN SHEFFIELD?

2.1 The HWBB needs to work in an effective way, in order to be able to deliver on its goal of closing the gap in healthy life expectancy in Sheffield. This is particularly the case given the upcoming changes to local NHS structures and the HWBB needing to be able to articulate Sheffield's health and wellbeing needs and priorities at a wider system level.

2.2 The proposals detailed in this paper should help to tackle health inequalities in the following ways:

- Bringing in a broader range of voices and more diverse insight into health and wellbeing priorities set out by the Board;
- Providing opportunity for decision makers in the city to come together with people experiencing health inequalities, working towards co-produced solutions; and
- Where possible, providing the opportunity for the HWBB to get out of its normal meeting settings and "into communities".

3.0 BACKGROUND

3.1 In December 2021, the HWBB started a process of review and refresh in light of an identified need to refocus its efforts as we emerge from the immediate crisis period of the Covid-19 pandemic.

3.2 A series of other key implications on future Board activity were also identified:

- the upcoming changes to local NHS structures, as per legislation currently proceeding through parliament;
- changes to Sheffield City Council's governance arrangements, of which the Health & Wellbeing Board is a part; and
- work being undertaken by Sheffield City Partnership to develop a new City Strategy.

3.3 To support this refresh and review, Board members took part in a dedicated discussion at December's strategy development session and also had a one-to-one interview with a member of Sheffield City Council's Strategy & Partnerships team.

3.4 Both December's strategy development session and the 1:1 interviews asked Board members a series of open questions to support thinking about the issues involved in considering the Board's future direction.

3.5 These discussions were centred around five main themes:

- The scope of the Board's work
- The functions it carries out
- The methods it uses to do this
- The membership of the Board and who participates in discussions
- The relationship it has with other bodies in Sheffield and beyond

3.6 Following the completion of the 1:1 interviews, the key findings were presented back to the HWBB in February's strategy development meeting, with this paper setting out the proposed next steps based on feedback from that meeting.

4.0 KEY FINDINGS

Scope

4.1 There was broad agreement that the Board should be focused on addressing health inequalities in Sheffield, looking beyond NHS and social care services to encompass all determinants of health and wellbeing. However, this was not matched by a sense that this is clearly set out and collectively owned by Board members.

4.2 There was a strong view and broad agreement that the Board must be a body that has a meaningful impact on Sheffield and be able to demonstrate positive change. However, there was not clear consensus on what impact means for the Board, and how it could or should be measured.

4.3 It was clear that the Board should have an all-age approach, as reflected in the Strategy, but concern that it can tend to focus on adults.

Functions

- 4.4 There was general agreement that the Board discharges its statutory duties in relation to the Joint Strategic Needs Assessment, Pharmaceutical Needs Assessment, Joint Health and Wellbeing Strategy, and encouraging integrated working, well.
- 4.5 There was also agreement that the Board's functions are not restricted to these, and that it should also be a strategic place for coordination and for systems leaders to get out of silos and bring things together. There was also a sense that the HWBB should be able to represent health and wellbeing priorities in other forums, including up to the ICS in the future, with a strong view on the importance of engagement and knowing the place.

Methods

- 4.6 There was a sense that the way HWBB meetings are organised at the moment (with the separate formal and informal strategy development sessions) are good in principle but don't really seem to be working the way they have set out to do.
- 4.7 There was also agreement that the Board should be a place that engages in challenging conversations, as envisaged in the Joint Health & Wellbeing Strategy, but that so far this has not happened to the intended degree.
- 4.8 Linked to the discussion about impact, it was reflected that the Board is not very good at tracking and following up actions and decisions being made and suggested that there should be a regular conversation about how Sheffield is doing in relation to the Board's priorities. This would help to build accountability into the Board's work.
- 4.9 Some Board members reflected on how it could be ensured that coproduction and codesign is a feature of the Board's work, with the voices of residents influencing how things progress.

Membership

- 4.10 There was agreement that an all-age Board needs to have a membership that reflects this, and concern that the current membership does not do this.
- 4.11 There was broad agreement on the need for clarity on the precise role of Board members, and what they are expected to deliver as "system leaders". For example, whether they should bring expertise from a particular constituency, or whether they should bring some influence over their organisation or other Boards they are a member of.
- 4.12 There was a view expressed that the Board is too dominated by Sheffield City Council and the Clinical Commissioning Group, and that there should be an aim to widen membership across the city and its organisations, to allow for a greater diversity of views.
- 4.13 However, there was also a sense that a widened membership might mean the Board would become too unwieldy and less effective as a partnership. The idea of having a

smaller 'core' membership to fulfil statutory duties, and a wider and more flexible invite list to address other functions was suggested several times.

- 4.14 There needs to be a strong position on deputies, ensuring that informed substitutes are available if someone is unable to attend.

Relationship to other bodies

- 4.15 There was a lack of clarity identified in how the various strategic partnerships in Sheffield fit and work together, and a desire for this to be set out.
- 4.16 It was also noted that the health and wellbeing conversation should be represented in those other spaces, to reflect the Board's 'all determinants of health' approach. This could be facilitated by HWBB members who also attend other strategic partnerships.
- 4.17 It was suggested that the Board doesn't have a strong enough link to groups that are tasked with driving progress, to ask what impact is being made against the Joint Health and Wellbeing Strategy.
- 4.18 There was a strong view that the HWBB's future relationship with the ICS in South Yorkshire will be extremely important and provide an opportunity for city leaders to take a collective understanding of Sheffield's health and wellbeing needs into wider discussions. However, this review and refresh is needed to ensure that the HWBB has a strong enough individual position, to take full advantage of this relationship.

5.0 PROPOSED CHANGES TO HWBB MEETINGS

- 5.1 Based on the findings outlined above and subsequent feedback from February's strategy development session, this paper proposes that, in the future, the HWBB splits its functions into three distinct parts:

- formal committee meetings;
- conference-style events focused on specific priorities;
- the Board's steering group.

- 5.2 The biggest change here is that the conference-type events will replace the strategy development sessions in their current form, though there will be some implications for the formal committee meetings and the HWBB steering group's role too.

Formal committee meetings

- 5.3 The four formal public meetings per year will continue, using these to fulfil the Board's statutory functions as is currently the case.
- 5.4 These meetings will also be used to give the Board the opportunity to receive and discuss engagement and intelligence, input into change proposals, and see progress reports on key pieces of work.
- 5.5 One of these meetings each year will be used to look back at what has been achieved that year, refresh the Board's mission, and set priorities for the year ahead.

Conference-type events

- 5.6 Strategy development sessions will end in their current form and be replaced by three significant half-day conference-style events a year.
- 5.7 These events will be focused on specific themes or priorities from the current Strategy, to be decided upon by the Board at the annual look back/look forward discussion at the formal committee meeting (see above).
- 5.8 To give a sense of what these could like, the following examples are suggested:
- A conference on 'Housing and Health' based on ambition four – “Everyone has access to a home that supports their health”; or
 - A conference on 'Early years' or 'The first 1001 days' based on ambition one – “Every child achieves a level of development in their early years for the best start in life”; or
 - A conference on 'Tackling loneliness and social isolation' based on ambition eight – “Everyone has the level of meaningful social contact that they want”.
- 5.9 These events could also be run in partnership with other bodies – e.g., work with the Economic Partnership on an event themed around inclusive growth and health, with outputs for both boards to consider.
- 5.10 These events will have broad attendance, linking in Board members as key decision makers in the city with a service user perspective from organisations, individuals and experts in the field who can bring a diverse range of insights into the discussion.
- 5.11 This bringing of different perspectives together to discuss the challenges Sheffield's health and wellbeing faces will support the development of new solutions. It will be critical to ensure that attendance is representative of the city as a whole, as appropriate for the issue at hand, and to ensure that everyone attending these events speaks on the same terms and with the same expectations of being heard.

The HWBB steering group

- 5.12 The Steering Group will continue to meet monthly, with its focus being on ensuring the Board is talking about the right things, in the right way.
- 5.13 It will maintain its ownership of the HWBB's forward plan, but will also take responsibility for designing the conference events to ensure that they are engaging, meaningful, and impactful for attendees and the city.

6.0 WHY WE ARE PROPOSING THESE CHANGES

These changes are intended to respond to or deliver the following:

- Responding to feedback that the current meeting format hasn't worked out the way it intended to do, this would shift the style of meetings outside of the formal committees.

- It would give the Board the opportunity to prioritise its attention for a given year, giving it something tangible to focus on underneath the Joint Health and Wellbeing Strategy
- It would provide a way for the voices shaping conversations to be more representative of the city as a whole.
- It would provide a clearer way in for lived experience and other expertise, without this being concentrated in a small number of people.
- It would allow Board resources to be focused on a small number of higher quality, high impact events, rather than spreading this out over monthly meetings.
- It will free up Board member time.
- It will provide space to add fresh impetus and energy into the formal Board meetings.
- It would provide a clear signal of change and refresh to the Board's work as we look forward beyond Covid.

7.0 CHANGES TO HWBB MEMBERSHIP

7.1 In light of this proposal and wider membership issues, we would also expect some changes to the Board's membership.

7.2 Due to not being yet clear on both Council and ICS governance arrangements, it is not yet possible to make firm recommendations in this area. However it is possible to set out the parameters of the discussion that needs to take place, and commit to bringing back a firm proposal to the next public meeting.

7.3 Any changes to the Board's membership will need to reflect the following points:

- They should not lead to an overall increase in the size of the Board
- There must be an increase in the proportion of voices with a focus on children and young people
- All statutorily required members must be retained
- There should be an expectation that Board members bring either subject matter expertise, organisational influence, or both, and members should be selected on this basis

8.0 CO-CHAIRING ARRANGEMENTS

8.1 The existing co-Chairing arrangements have been a valued symbol of the Board as a partnership. However, it is not clear who the appropriate replacements for CCG Governing Body members will be, once the CCG ceases to exist, and in particular the Chair of the Governing Body in their role as co-Chair of the Board.

8.2 It is suggested that work should be undertaken, alongside that to identify appropriate future local NHS representation, to decide the most appropriate future chairing arrangements. The preference would be for maintenance of the co-Chairing arrangement; however this will depend on identifying an equivalent non-Executive role

from an NHS perspective. If this cannot be identified it is suggested that chairing of the Board will be the responsibility of one of the Elected Member representatives.

9.0 ROLE OF MEMBERS AND DEPUTIES

- 9.1 For these changes to work, it will require commitment from Board members to ensure all perspectives are part of all discussions. This means there will need to be an expectation that Board members prioritise formal committee meetings and conference events, with a nominated deputy to attend in their place if necessary.
- 9.2 In addition, it will be important for Board members to play a strong role in promoting the mini-conference events, identifying relevant people to attend and contribute, and taking action away for delivery.
- 9.3 It is critical to understand that if the Health & Wellbeing Board is to have an impact, it will be through and because of the actions, of individuals and organisations, that result from its discussions, and it is the responsibility of all to deliver on this.

10.0 QUESTIONS FOR THE BOARD

- 10.1 Do these proposals take into account the key considerations of Board members when thinking about the HWBB's future direction?
- 10.2 Do these proposals make sense in light of NHS and Council governance reforms, as well as wider contextual changes, e.g., 'living with Covid' plans, changes in Sheffield's partnership landscape?
- 10.3 Do the proposals give the urgency needed to ensure that the HWBB can have the most significant impact on health inequalities in Sheffield?

11.0 RECOMMENDATIONS

- 11.1 The Board are asked to:
- a) Note and agree the framework for the future of the Board set out in this paper
 - b) Note and agree the framework for future membership, and agree to further work to identify appropriate NHS members, and members with a focus on children and young people
 - c) Agree to receive a final revised set of Terms of Reference for the Board at their June 2022 meeting based on these proposals, ahead of putting these to Full Council for approval and incorporation into the Constitution

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