

Refocusing the GM Health & Wellbeing Board September 2014

Summary

On 8 August 2014 the GM Health & Wellbeing Board met to consider its role and priorities. North West Employers helped facilitate a session which focused upon:

- Presentations on the background to the Board, the GM context and strategic priorities.
- What should the status and position of the GM Board be?
- What should be the focus and content of activity over the coming 18 months?
- How should the Board work?

The Greater Manchester Health & Wellbeing Interim Board was set up in November 2012 as an AGMA advisory group. The Board built on the old Health Commission, reconvened with a new membership and a stronger focus upon health and social care integration. The Board has provided visible partnership support and direction to the GM Health and Social Care Reform Programme, particularly Healthier Together in the run up to the launch of the public consultation.

At the facilitated session the Board agreed:

The GM Health & Wellbeing Board will be a strategic partnership with an important symbolic presence. In order to be sustainable and justify the commitment made to it, the Board needs to take a strong leadership role, hosting debate and challenging its membership and partners.

There is a moral context to collaborative working and strategic leadership at the Greater Manchester level which builds upon the previous role of the Greater Manchester Health Commission. Greater Manchester suffers disproportionately from health inequalities and as the Greater Manchester Strategy makes clear, achieving our economic ambitions rests upon improving the health and wellbeing of our population.

Bringing together the membership of the Board represents a major opportunity. These organisations (principally GM CCGs, local authorities, NHS England) with links to local partnerships and ten local authority leaders represent the key leadership community which will transform services and improve outcomes. Particularly so, given the opportunity to work with emergency response services, the community and voluntary and private sector, and universities in Greater Manchester.

The Board recognises that much of the decision making and work will be carried out at the local level, and agrees that by collaborating at the GM level we can provide the leadership commitment to overcome barriers, proceed at pace, scale up success and lobby national bodies where necessary.

This Board will focus on a smaller number of strategic priorities, to include:

- Early years
- Supporting people into work
- Supporting older people

These three priorities represent a life-course approach, and align with the Greater Manchester Strategy and the developing GM Public's Health Strategy.

What should the status and position of the GM Board be?

The Board felt that it should act as a strategic leader. This means:

- providing visible leadership on those issues which will contribute most to securing improvements in health and wellbeing.
- challenging the Board's own membership and other partners, including local Health & Wellbeing Boards and commissioning groups, on the improvements required, and to showcase and celebrate progress across the partnership.
- better understanding existing performance and barriers, which needs to be explored in a mutually supportive and positive culture.
- establishing the framework for local activity to wrap around, particularly in the context of the Greater Manchester Strategy and Public Service Reform.

The Board should be ambitious and look upwards to influence nationally, with minimum unit price providing an excellent example of how leadership in Greater Manchester can influence national debate. Greater Manchester's national reputation is significant, and the Board should champion Greater Manchester as a focal point for innovation and piloting.

The Board should more regularly agree and communicate policy positions across Greater Manchester. This was a valuable role of the previous GM Health Commission which had agreed policy positions on a range of topics including domestic violence, smoking, obesity, and affordable warmth.

The Board will help to provide leadership in the context of the challenging financial pressures that we all face. The Board felt that there will inevitably be tensions but that it should itself act as a positive arena for resolving these.

What should be the focus and content of activity over the coming 18 months?

In the context of Public Service Reform, and recognising that aspects of current priorities are being successfully led from elsewhere, the Board should focus upon the three following areas:

- Early years.
- Supporting people into work.
- Supporting older people. In particular, the Board will provide ongoing support and endorsement of Greater Manchester's bid to the Big Lottery Fund for funding to tackle social isolation of older people.

These three priorities represent a life-course approach, and align with the Greater Manchester Strategy and the developing GM Public's Health Strategy.

Officers supporting the Board will work with Chief Officers and local Health & Wellbeing Boards to establish current activity and priorities for each of the three areas. The Board will draw upon the Greater Manchester Public's Health Strategy, and the advice of GM Directors of Public Health and Public Health England as key sources of advice and information.

There will be scope for the Board to receive updates on projects it has previously endorsed, but as far as possible these will be short notes circulated for information, and only discussed during meetings when there is a clear decision for the Board to make.

The Board will retain a role of endorsement of the 'big ticket' aspects of the Health & Social Care Public Service Reform Programme, but only at key moments in the relevant processes.

How should the Board work?

Each Board meeting should focus upon exploring one strategic issue. The Board agreed that a more consistent approach to agenda setting would lead to better discussion and outcomes at Board meetings. The Board explored a common framework for designing meeting using the following framework:

Understanding the issue	Supporting the Board to take decisions
<ul style="list-style-type: none"> • Evidence base – the GM issue and what works • Liaise with 10 local H&WB Boards to <ul style="list-style-type: none"> ○ gather examples of best practice within GM ○ identify any local challenges ○ describe current performance and existing local ‘success’ metrics • Explore data sharing and data access problems • Inviting comment from the Behaviour Change Commission, reviewing issues around community engagement and behaviour change • Present findings from Sector Led Improvement in GM • Explore the contribution of key emergency response partners 	<ul style="list-style-type: none"> • Ensure a GM strategic lead and expert opinion is engaged and invited to support the discussion at the Board meeting • Recommendations for collaboration at the GM level • Recommendations for GM leadership and lobbying • Agree and publicise a clear GM policy statement

The Agenda Planning Group will be responsible for exploring each strategic priority using this framework. This will require the Group to take a stronger role in advance of meetings which may include inviting expert witnesses to plan the discussion and presentations.

The Board also discussed its role outside formal meetings. The Board will endorse a network of Health & Wellbeing Board convenors, currently supported by Public Health England. It will also sponsor GM events, with a focus upon Care Act, Better Care Fund, Public Health issues and behaviour change.

The Board did not discuss the membership and as a result there are no proposals to revise this aspect of the Board. The Board felt that attendance at Board meetings needs to be restricted as far as possible, and accordingly the numbers of advisors and supporting officers who attend meetings will be restricted. The Board agreed to clarify the nominated local Health & Wellbeing Board representatives to the GM Board.

Next steps

The next meeting of the GM Board is scheduled for November 21st. The next Agenda Planning meeting is scheduled for October 2nd. It is proposed to focus the next meeting of the Board upon Early Years. Officers supporting the Board will liaise with the lead Chief Executive for Early Years and the lead Director of Children’s Services to prepare for the Agenda Planning meeting.