Report for ACTION by the Health & Wellbeing Board

Item Number: 9



| Contains Confidential or Exempt Information | NO |
|---|---|
| Title | Proposal for the Development of a Communication Strategy for the Health and Wellbeing Board |
| Responsible Officer(s) | Christabel Shawcross |
| Contact officer, job title | Catherine Mullins, NHS Changes Project Manager, |
| and phone number | 01628 68 3664 |
| Member reporting | Cllr David Coppinger |
| For Consideration By | Shadow Health and Wellbeing Board |
| Date to be Considered | Friday 7 December 2012 |
| Implementation Date if | Immediately |
| Not Called In | |
| Affected Wards | All |
| Keywords/Index | Communication Strategy, RACI Matrix |

Report Summary

- 1. This report deals with managing the communications that come to and from the Health and Wellbeing Board (HWB) by partners, stakeholders and other bodies, both locally and nationally
- 2. It recommends that the HWB accepts the recommendation to develop a communications strategy to manage the relations of the board
- 3. These recommendations are being made to ensure that the HWB remains being an effective committee of the council and complies with statutory guidance on engagement and communications
- 4. An additional point to note is that the secondary legislation for HWB is due to be issued at the end of January 2013 and will be considered by the HWB.

| If recommendations are adopted, how will residents benefit? | | |
|---|--|--|
| Benefits to residents and reasons why they will benefit | Dates by which residents can expect to notice a difference | |
| The HWB remains being an effective and high level strategic board where key issues are discussed and agreed for the benefit of residents | Spring 2013 | |
| 2. Communications to and from a range of partners, forums and boards with the HWB are managed and expectations on the HWB are in line with the remit of the HWB | Spring 2013 | |

1. Details of Recommendations

RECOMMENDATION: That the Shadow Health and Wellbeing Board delegate the development of a Communication Strategy and Framework to the joint officer Health and Social Care Executive, and that the strategy is to be agreed at the next meeting of the HWB

2. Reason for Recommendation(s) and Options Considered

| Option | Comments |
|--|--|
| That the HWB does not accept the proposal to develop a Communications Strategy | This could lead to ineffective communication and unrealistic expectations being placed on the HWB |
| That the HWB does accept the proposal to develop a Communications Strategy | Communications to and from the HWB would be managed and effective through ensuring that local stakeholder boards / forums and members of the public understand the |
| Recommended | processes and role of the HWB within correct governance arrangements |

3. Key Implications

What does success look like, how is it measured, what are the stretch targets

| Defined Outcomes | Unmet | Met | Exceeded | Significantly Exceeded | Date they should be deliver ed by |
|---|--|---|--|--|-----------------------------------|
| Communicati ons to and from the HWB are effective and the HWB is a high level strategic decision making Committee with clarity for partners on processes and issues to the HWB. | Communicati ons and impacts of the decisions of the HWB are not planned, ad hoc and uncoordinate d, which does not improve outcomes for residents | Communicati ons to and from the HWB are managed and partnership boards and forums have clear arrangement s with the HWB | Communicati ons to and from the HWB are managed and partnership boards, forums and members of the public have clear arrangement s with the HWB which support improved outcomes for residents | Communications to and from the HWB are managed and partnership boards, forums and members of the public have clear arrangements with the HWB which support significantly improved outcomes for residents | Post April 2013 |

4. Financial Details

a) Financial impact on the budget (mandatory) – There are no financial impacts with this recommendation

| Example | Year1 (state year) | Year2 (state year) | Year3 (state year) |
|-----------|--------------------|--------------------|--------------------|
| | Capital | Capital | Capital |
| | £000 | £000 | £000 |
| Addition | | | |
| Reduction | | | |

| Example | Year1 (state year) | Year2 (state year) | Year3 (state year) |
|-----------|--------------------|--------------------|--------------------|
| | * Revenue | Revenue | Revenue |
| | £000 | £000 | £000 |
| Addition | | | |
| Reduction | | | |

^{*} Revenue figures need to be shown as incremental/year on year to the budget

b) Financial Background (optional)

There are no financial impacts with this recommendation

5. Legal Implications

There are no legal implications for this recommendation, however for the Health and Wellbeing Board to effectively function and meet the HWB statutory requirements, processes need to be in place to ensure that the HWB operates effectively.

6. Value For Money - N / A

7. Sustainability Impact Appraisal – N / A

8. Risk Management

| Risks | Uncontrolled Risk | Controls | Controlled Risk |
|--|--|---|---|
| That the HWB is not able to, or not effective in, meeting statutory requirements due to processes of the HWD | The work of the HWB does not help residents or demonstrate improved outcomes due to inefficient communications and governance arrangements | Considered design of communications with governance arrangements for the HWB to ensure the work of the HWB is in keeping with the requirements of the HWB | Residents experience improved outcomes and the HWB is effective as a functioning committee of the Council |

9. Links to Strategic Objectives – Supporting the HWB to operate efficiently supports most of the strategic objectives of the Council, with particular emphasis on Residents First and Delivering Together

Our Strategic Objectives are:

Residents First

- Support Children and Young People
- Encourage Healthy People and Lifestyles
- Improve the Environment, Economy and Transport
- Work for safer and stronger communities

Value for Money

- Deliver Economic Services
- Improve the use of technology
- Increase non-Council Tax Revenue
- Invest in the future

Delivering Together

- Enhanced Customer Services
- Deliver Effective Services
- Strengthen Partnerships

Equipping Ourselves for the Future

- Equipping Our Workforce
- Developing Our systems and Structures
- Changing Our Culture
- 10. Equalities, Human Rights and Community Cohesion There are no equalities impact if the recommendation is accepted by the HWB, however for best practices, should a communication strategy be created, an Equalities Impact Assessment should be conducted
- 11. Staffing/Workforce and Accommodation implications None
- 12. Property and Assets None
- 13. Any other implications None

14. Consultation

This recommendation has not been consulted on, however if the recommendation is accepted the contents of a communication strategy may require a consultation with those who could be impacted by it

15. Timetable for Implementation

Health and Wellbeing Boards will have statutory powers from April 2013 and therefore the mechanisms for communications should be known from April 2013 onwards

16. Appendices - None

17. Background Information

The Health and Social Care Act have set up Health and Wellbeing Boards with statutory duties, which have a specific and yet wide reaching remit, including:

- Complying with the legal requirements of the Health and Social Care Act 2012 to integrate health and social care services, using Health Act 2006 S. 75 flexibilities to pool resources where it locally makes sense to do so
- Improve health outcomes and reduce health inequalities for local people
- Develop and deliver the Joint Strategic Needs Assessment
- Develop and deliver the Joint Health and Wellbeing Strategy
- Review the commissioning plans of the Clinical Commissioning Group(s) and the Local Authority against the Joint Health and Wellbeing Strategy priorities
- Ensure that there is patient and public engagement in the commissioning of health and social care services

From April 2013 the full statutory powers of the HWB will come into effect. For the HWB to deliver on these statutory duties it will have to be highly strategic, effective, and set out and oversee the shared vision for the commissioning of health and social care services. This includes those services areas which impact on the wider aspects of wellbeing for residents, but may not be seen traditionally as health or social care services.

The communication strategy and framework will be essential to the different health and social care related forums and bodies that have responsibilities, interests or services in the Borough. Mapping these organisations and their interactions with the HWB will influence the communications required for the HWB to complete its role effectively

To effectively deliver on these functions the HWB needs to be able to manage the relations, communications and expectations placed on it and which it has with the other stakeholders, boards and forums. Therefore the creation of a communication strategy will be able to set a context for the work of the HWB and the parameters of the relations it has with the other boards and forums.

The outcomes of the communication strategy will be:

- Clarity on understanding the key roles of the partners, forums and stakeholder groups of the HWB
- A clearer understanding on the role and function of the HWB
- Outline for the potential amendments to governance arrangements that may be required for various partners (i.e. changes to terms of reference and constitutions)
- Alignment of strategic and operational activities, potential to integrate and find synergies with the statutory requirements of the HWB and priorities of the membership organisations with wider stakeholder groups

HWB are seen as the pivotal forum by which local priorities are set, therefore the amount of areas that the HWB may wish to have oversight or communications with is an increasing. The recommendations of setting out a communication strategy and reporting matrix could support the HWB in efficiently achieving its statutory remit.

18. Consultation (Mandatory)

| Name of consultee | Post held and Department | Date sent | Date received | See comments in paragraph: |
|-------------------|--|-----------|---------------|----------------------------|
| Internal | | | | |
| Cllr Coppinger | Lead Council Member for Adult Services and Health | 30 Nov | | |
| Christabel | Interim Head of | 29 Nov. | | |
| Shawcross | Paid Services | 12 | | |
| External – N/A | | | | |

Report History

| Decision type: | Urgency item? |
|------------------|---------------|
| Non-key decision | No |

| Full name of report author | Job title | Full contact no: |
|----------------------------|-----------------------------|------------------|
| Catherine Mullins | NHS Changes Project Manager | 01628 68 3664 |

Schedule for writing and reviewing report

| Stages in the life of the report (not all will apply) | Date to complete |
|--|------------------|
| Officer writes report (in consultation with Lead Member) | 29 Nov 12 |
| 2. Report goes for review to head of service or DMT | 29 Nov 12 |
| 3. To specialist departments: eg, legal, finance, HR (in parallel) | N/A |
| 4. To lead member | N/A |
| 5. To SMT or CMT | N/A |
| 6. To the leader | N/A |
| 7. To overview or scrutiny, if a cabinet report | N/A |
| 8. To cabinet | N/A |