

Task Group Report: Development of the Devon Health and Wellbeing Board

Executive Summary

Recommendation: It is recommended that the board approve the objectives for board development, approve the action plan, and nominate officers from their organisations and teams to support the delivery of the action plan.

This paper proposes objectives for the development of the Devon Health and Wellbeing Board following discussions about the role and priorities of the board at the June 2018 Devon Health and Wellbeing Board Stakeholders Conference. The conference, attended by board and scrutiny members and local system leaders across health, local authority, community and voluntary sector and other partners involved structured table discussions around the role of the board. Feedback highlighted the need to focus on health and not just healthcare, with a tiered approach to geography with democratic accountability at all levels. Issues raised and suggestions made included closer working across the three health and wellbeing boards in the wider Devon area, a specific role for the board in the joint commissioning of health and care, a stronger emphasis on the wider determinants of health, a more focused role for the board in holding the wider system to account, and the development of links with stakeholders and local areas.

This has led to the following objectives for board development:

1. Establishing alignment with other partnerships focused on the wider determinants of health
2. Establish a wider Health and Wellbeing Network to support, inform and disseminate the work of the Health and Wellbeing Board
3. Utilise a tiered approach to geography with democratic accountability at all levels and a two-way information flow to inform local priority setting
4. Strengthen and formalise the role of the board in providing assurance that the commissioning plans of local organisations reflect boards priorities
5. Establish the board's role in the strategic planning of health, care and wellbeing
6. Increase collaboration between Devon, Plymouth and Torbay Health and Wellbeing Boards.

Specific actions have been identified to achieve these objectives, which have been divided between initial actions to be undertaken by the December 2018 board meeting, and further actions during 2019 to fully achieve the objective. These actions will require the support of board members, alongside officer input from their organisations and teams to achieve.

Initial action plan: September to December 2018

- Invite Devon Fire and Rescue Service and SWAST to become board members (objective 1: partnerships)
- Meeting between board representatives (chair and lead members) and representatives of local partnership boards covering the wider determinants of health in Devon to establish strategic alignment and agree how the boards can work better together (objective 1: partnerships)
- Develop and extend the 'working together' protocol for Strategic Partnership Boards in Devon to define working relationships and responsibilities (objective 1: partnerships)
- Support the development of partnerships around housing and establish a clear line of accountability to emerging structures (objective 1: partnerships)
- Consider defining lead/champion roles for board members around specific topic areas (objective 1: partnerships)

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- Design and agree principles for and establish an initial 'network', starting with invitees for the annual stakeholder conference and expanding this out to other strategic partners, and using the network to communicate information from the board in the first instance, focused initially on new ways of working (objective 2: network)
- Work directly with STP organisational design colleagues to map existing and emerging structures and bodies at local level, including district health and wellbeing boards, locality forums, town partnerships and hubs (objective 3: geography)
- Investigate the establishment of the Dorset 'locality group' arrangement with Devon districts, potentially utilising existing district level partnerships (objective 3: geography)
- Promote and facilitate use of the new JSNA profile tool by local partnerships for the assessment and comparison of health, care and wellbeing needs (objective 3: geography)
- Establish a list of commissioning plans and strategies (including BCF) to be assessed by board relating to both health and care, and the wider determinants of health, working with Devon STP and neighbouring local authorities where relevant (objective 4: assurance)
- Establish and agree a clear process for the review of commissioning plans (including BCF) by the health and wellbeing board including agreeing the respective roles of board and scrutiny in any process and developing a checklist to help determine if board priorities are covered, working with Devon STP and neighbouring local authorities where relevant (objective 4: assurance)
- Devon STP to facilitate an organisational development session with health and wellbeing board leaders to jointly determine the role of health and wellbeing boards in the STP (objective 5: strategic planning role)
- Undertake a review of the current STP strategy to ensure alignment with board priorities and determine which priorities the board would want to see translated into specific activities and plans (objective 5: strategic planning role)
- Use proposed Devon STP organisational development session (objective 5) to identify other opportunities for collaboration across local boards (objective 6: inter-board collaboration)

Further action plan: 2019

- Establish joint working arrangements with relevant partnership boards and use the new updated JHWS as a mechanism to drive collaboration between partnership boards and inform the agenda of the health and wellbeing board (objective 1: partnerships)
- Consider whether it would be beneficial for the health and wellbeing board to be the place where relevant partnership boards come together, and review board membership accordingly (objective 1: partnerships)
- Embed and strengthen the role of the network. Ensure it can support the board on its objectives and projects (objective 2: network)
- Work with existing groups, committees and boards to establish theme-based links, establishing new sub-committees where no such group exists, and a gap is identified (objective 2: network)
- Encourage democratic representation at locality and town level in existing and emerging health and wellbeing partnerships (objective 3: geography)
- Produce locality/local authority and town level summaries of needs and priorities (drawn from JSNA and JHWS) to contextualise board priorities at a local level and facilitate priority setting and action planning aligned to board priorities at all geographic levels (objective 3: geography)
- Establish a two-way dialogue with locality and town-based partnerships, communicating priorities and findings and gathering local intelligence, needs and issues (objective 3: geography)
- Work as part of Devon STP to ensure neighbourhood structures are linked with the health and wellbeing board (objective 3: geography)

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- Embed processes for reviewing commissioning plans (including BCF), with clearly defined and complementary roles for health and wellbeing board and scrutiny (objective 4: assurance)
- Subject to agreement and approval from local authorities and health organisations, local health and wellbeing board input and democratic accountability in the strategic planning of health, care and wellbeing to be established (objective 5: strategic planning role)
- Subject to approval from three local authorities, steps to increase board collaboration agreed and put into practice (objective 6: inter-board collaboration)

Full Report

Recommendation: It is recommended that the board approve the objectives for board development, approve the action plan, and nominate officers from their organisations and teams to support the delivery of the action plan.

1. Introduction

1.1 This paper proposes objectives for the development of the Devon Health and Wellbeing Board following discussions about the role and priorities of the board at the June 2018 Devon Health and Wellbeing Board Stakeholders Conference.

2. Findings from Devon Health and Wellbeing Board Stakeholders Conference, June 2018

2.1 The stakeholder conference brought together a wide range of people across Devon, including board members, scrutiny committee members, county council officers, health and care professionals, local authority district members and officers, voluntary and community sector representatives, and other local partners include police and fire services. The stakeholder conference was divided into two sections, one reviewing board priorities to inform the refresh of the Joint Health and Wellbeing Strategy (STP) in 2019, and one entitled 'working together' which focused on the future role of the board.

2.2 The main theme from the priorities discussions was for the vision of the board to be clearer and less 'top down' with the priorities and emphasis being more targeted on specific challenges for Devon rather than trying to cover all bases. Priorities raised by stakeholders included mental health, physical activity, health inequalities, rurality, housing, workforce, economic development, disability and health literacy. There was also a call for there to be more explicit read across between the Joint Health and Wellbeing Strategy and the Devon Sustainability Transformation Partnership (STP) strategy. This feedback will inform the revised JHWS, which will link explicitly to the STP plan and focus areas, and also reflect emerging national direction around place and neighbourhood-based care and the developing role of prevention across the system.

2.3 In the 'working together' session there was a general desire to focus on health and not just healthcare, with a tiered approach to geography with democratic accountability at all levels. Issues raised and suggestions made included closer working across the three health and wellbeing boards in the wider Devon area, a specific role for the board in the joint commissioning of health and care, a stronger emphasis on the wider determinants of health, a more focused role for the board in holding the wider system to account, and the development of links with stakeholders and local areas. A full summary of findings from stakeholder conference discussions is provided in appendix 1.

3. Objectives for Board Development

3.1 Health and Wellbeing Boards are a formal committee of the local authority to promote greater integration and partnership between bodies from the NHS, local government and public health to improve population health. The statutory duty of boards is to produce a joint strategic needs assessment (JSNA - an assessment of current and future health and care needs in the local population) and a joint health and wellbeing strategy (JHWS - a local strategy for the local population addressing the needs identified in the JSNA), as well as having oversight of CCG commissioning plans and Better Care Fund plans. Rather than just considering health and care services, Health and Wellbeing board focus on the whole health and wellbeing system, which considers the influence of employment, education, housing and other wider social factors influencing health and wellbeing.

3.2 The evolving role of the Devon Sustainability and Transformation Partnership also provides further context for the ongoing development of the health and wellbeing board. The Devon STP plan two-year report (<http://www.devonstp.org.uk/about-the-stp/plan/>) was published in July 2018 and reinforced the triple aim for the system of improving population

health and wellbeing, the experience of care and cost effectiveness. The two-year report set four strategic priorities for the STP: enabling more people to be healthy and stay healthy; enhancing self-care and community resilience; integrating and improving community services and care in people's homes; and delivering modern, safe and sustainable services. Organisational design work is currently underway to guide the development of the integrated care system locally, with the STP strategy on a page guiding this design work and setting goals and design criteria for the system (see agenda item 7).

3.3 In the context of the findings from the stakeholder conference, the statutory role of health and wellbeing boards, and the developing role of the STP, several objectives for board development are proposed. Whilst these changes are a legitimate aspiration for the board, they will require discussing and agreeing actions across wider partnerships and committees, which may take time to do. Consequently, proposed actions to achieve these objectives are phased, setting out initial actions to set the work on course during 2018, and further actions to fully achieve the objective in 2019.

3.4 The proposed objectives, which are described in more detail below, are:

1. Establishing alignment with other partnerships focused on the wider determinants of health
2. Establish a wider Health and Wellbeing Network to support, inform and disseminate the work of the Health and Wellbeing Board
3. Utilise a tiered approach to geography with democratic accountability at all levels and a two-way information flow to inform local priority setting
4. Strengthen and formalise the role of the board in providing assurance that the commissioning plans of local organisations reflect boards priorities
5. Establish the board's role in the strategic planning of health, care and wellbeing
6. Increase collaboration between Devon, Plymouth and Torbay health and wellbeing boards

Objective 1: Establishing alignment with other partnerships focused on the wider determinants of health

Description
<p>Conference discussions focused on the importance of prioritising the wider determinants of health, and the board having a dual focus on the wider determinants of health and influencing health and care commissioning. Various strategic partnerships exist across Devon relating to the wider determinants of health which the board could be working with in a more effective way. This also links directly to the Devon STP plan, with has strategic priorities around enabling more people to be healthy and stay healthy (priority one) and enhancing self-care and community resilience (priority two).</p> <p>Existing partnerships with a specific remit around the wider determinants of health include the Safer Devon Partnership, Local Enterprise Partnership, Local Nature Partnership, Safeguarding Adults and Safeguarding Children boards. Gaps in partnerships also exist in some areas of need which align to JHWS priorities, such as housing. Outside of county-wide partnerships, much work on the wider determinants of health happens at a local authority district level, and there is also a need to strengthen engagement here. This also links to cross-organisational work in Devon STP to establish place and neighbourhood-based arrangements relating to strategic planning, resource management, performance management and care redesign.</p> <p>Stakeholder feedback also raised the potential for the board to be a point of focus where existing 'wider determinant' partnerships could come together.</p>
Initial Actions (by December 2018)
<p>Invite Devon Fire and Rescue Service and SWAST to become board members.</p> <p>Meeting between board representatives (chair and lead members) and representatives of local partnership boards covering the wider determinants of health in Devon to establish strategic alignment and agree how the boards can work better together.</p>

<p>Develop and extend the 'working together' protocol for Strategic Partnership Boards in Devon to define working relationships and responsibilities.</p> <p>Support the development of partnerships around housing and establish a clear line of accountability to emerging structures.</p> <p>Consider defining lead/champion roles for board members around specific topic areas.</p>
<p>Next Steps (During 2019)</p>
<p>Establish joint working arrangements with relevant partnership boards and use the new updated JHWS as a mechanism to drive collaboration between partnership boards and inform the agenda of the health and wellbeing board.</p> <p>Consider whether it would be beneficial for the health and wellbeing board to be the place where relevant partnership boards come together, and review board membership accordingly.</p>
<p>Measures of Success</p>
<p>Shared knowledge base, priorities and objectives across local partnerships.</p> <p>Partnership boards working closer together, with a coherent and complimentary focus on the wider determinants of health, such as housing, employment and education.</p>

Objective 2: Establish a wider Health and Wellbeing Network to support, inform and disseminate the work of the Health and Wellbeing Board

<p>Description</p> <p>Conference discussions raised the concept of a wider Devon Health and Wellbeing Network, which would provide a formalised means for stakeholders to support board work and objectives. Such a network was advocated as a way of facilitating wider links and creating a body of local expertise that board members could draw upon. This would also avoid one person speaking at board on behalf of an entire organisation or sector and lead to greater involvement of the voluntary and community sector and other local partners.</p> <p>This is also linked to calls for more agile governance arrangements, which could potentially involve a more dynamic fluid approach to membership with the board co-opting additional members or specific input from individuals for pieces of work. There were also suggestions made around themed sub-committees within the board which could draw on more specific expertise around particular themes or issues.</p>
<p>Initial Actions (by December 2018)</p>
<p>Design and agree principles for and establish an initial 'network', starting with invitees for the annual stakeholder conference and expanding this out to other strategic partners, and using the network to communicate information from the board in the first instance, focused initially on new ways of working.</p>
<p>Next Steps (During 2019)</p>
<p>Embed and strengthen the role of the network. Ensure it can support the board on its objectives and projects.</p> <p>Work with existing groups, committees and boards to establish theme-based links, establishing new sub-committees where no such group exists, and a gap is identified.</p>
<p>Measures of Success</p>
<p>Effective communication between board and stakeholders which supports and informs the delivery of board priorities.</p>

Objective 3: Utilise a tiered approach to geography with democratic accountability at all levels and a two-way information flow to inform local priority setting

Description

A common and recurring theme of stakeholder discussions was around creating a tiered approach to geography, with the board working to a structure focused on three distinct levels at STP/board level, locality/local authority district level and town/neighbourhood level. The 29 market and coastal towns of Devon were identified through these discussions as a potentially useful lower tier, which also aligns to the presence of GPs, community health services and mechanisms for wider support.

This broadly aligns with national policy direction around health and care integration and place-based care. The National Director for Health System Transformation at NHS England, Michael Macdonnell, outlined an emerging system based on neighbourhoods, places, and system as described below:

Level	Pop. Size	Purpose
Neighbourhood	~50k	<ul style="list-style-type: none"> Strengthen primary care Network practices Proactive & integrated models for defined population
Place	~250-500k	<ul style="list-style-type: none"> Typically borough/council level Integrate hospital, council & primary care teams / services Hold GP networks to account
System	1+m	<ul style="list-style-type: none"> System strategy & planning Hold places to account Implement strategic change Manage performance and £

Each level would perform specific functions in relation to leadership, care redesign, performance management, strategic planning and resource management. It should also be noted that the national population size figures for different levels are a guide only, and a more refined approach is required to define these levels, especially in a predominantly rural area like Devon. Organisational design work is currently underway within the Devon STP to define these structures locally. This work is focused on aligning these emerging levels with local authority districts and upper tier / unitary authorities in Devon, reflecting the role of local authorities in prevention and tackling the wider determinants of health. Linking health and wellbeing board work to this exercise would be a logical approach.

Some health and wellbeing boards have also defined 'locality groups'. In Dorset these are at local authority district level, with the main board responsible for strategic issues and key decisions and the locality groups responsible for delivery against outcomes and JHWS priorities. Selected board members attend locality groups and locality group members also have an opportunity to present to the board.

Initial Actions (by December 2018)

Work directly with STP organisational design colleagues to map existing and emerging structures and bodies at local level, including district health and wellbeing boards, locality forums, town partnerships and hubs with the purpose of:

- Supporting the development of local neighbourhoods and places for the STP
- Understanding local place-based arrangements and identifying any gaps
- Adding identified bodies to health and wellbeing network

<p>Investigate the establishment of the Dorset 'locality group' arrangement with Devon districts, potentially utilising existing district level partnerships.</p> <p>Promote and facilitate use of the new JSNA profile tool by local partnerships for the assessment and comparison of health, care and wellbeing needs.</p>
<p>Next Steps (During 2019)</p>
<p>Encourage democratic representation at locality and town level in existing and emerging health and wellbeing partnerships.</p> <p>Produce locality/local authority and town level summaries of needs and priorities (drawn from JSNA and JHWS) to contextualise board priorities at a local level and facilitate priority setting and action planning aligned to board priorities at all geographic levels.</p> <p>Establish a two-way dialogue with locality and town-based partnerships, communicating priorities and findings and gathering local intelligence, needs and issues.</p> <p>Work as part of Devon STP to ensure neighbourhood structures are linked with the health and wellbeing board.</p>
<p>Measures of Success</p>
<p>Consistency achieved between Devon STP and Health and Wellbeing Board work in relation to how local partnerships are defined and supported.</p> <p>Local partnerships at locality/district (place) and town (neighbourhood) levels identified and established.</p> <p>Needs and priorities are described at place and neighbourhood level to influence local work.</p> <p>Feedback loop exists between board, localities and towns.</p>

Objective 4: Strengthen and formalise the role of the board in providing assurance that the commissioning plans of local organisations reflect boards priorities

<p>Description</p> <p>Conference discussions highlighted the independent role of the board as a strength but called on the board to be braver and offer more constructive criticism. This includes the board providing a stronger assurance role to the commissioning plans of local organisations and making sure they reflect JSNA challenges and JHWS priorities, not just in relation to health care but to the wider determinants of health as well.</p> <p>This also includes the need to clarify and update arrangements for overseeing the strategic direction of the Better Care Fund (BCF), which includes reviewing performance, and signing off plans and reports as per BCF operating guidance for 2017-19.</p> <p>To date the board's role in assuring the commissioning plans of local organisations has not been supported by a formal structured review process.</p>
<p>Initial Actions (by December 2018)</p> <p>Establish a list of commissioning plans and strategies (including BCF) to be assessed by board relating to both health and care, and the wider determinants of health, working with Devon STP and neighbouring local authorities where relevant.</p> <p>Establish and agree a clear process for the review of commissioning plans (including BCF) by the health and wellbeing board including agreeing the respective roles of board and scrutiny in any process and developing a checklist to help determine if board priorities are covered, working with Devon STP and neighbouring local authorities where relevant.</p>

Next Steps (During 2019)
Embed processes for reviewing commissioning plans (including BCF), with clearly defined and complementary roles for health and wellbeing board and scrutiny.
Measures of Success
A process is in place to assure the board that their priorities are reflected in commissioning plans, with steps to follow if not assured.

Objective 5: Establish the board's role in the strategic planning of health, care and wellbeing

Description
<p>Conference discussions at the stakeholder conference highlighted that local stakeholders wanted the Devon Health and Wellbeing Board to take an active role in providing system leadership, including a specific role in relation to the strategic planning of health, care and wellbeing.</p> <p>Health and Wellbeing Boards cannot directly commission services, but some areas have established local arrangements to ensure that the board has a more prominent role in the strategic planning of health, care and wellbeing, and setting the strategic direction and principles for commissioners to follow. For instance, Dorset's health and wellbeing board, with Bournemouth and Poole has shared accountability for a single joint commissioning board for health and social care, with the STP board reporting to the health and wellbeing board and a joint commissioning programme using the Better Care Fund as the delivery vehicle. Southampton have formed a separate Joint Commissioning Board including cabinet members, CCG representatives, and senior officers from the council which is accountable for effective collaboration, assurance, oversight and governance of integrated commissioning which demonstrates contribution to Joint Health and Wellbeing Strategy outcomes.</p>
Initial Actions (by December 2018)
<p>Devon STP to facilitate an organisational development session with health and wellbeing board leaders to jointly determine the role of health and wellbeing boards in the STP.</p> <p>Undertake a review of the current STP strategy to ensure alignment with board priorities and determine which priorities the board would want to see translated into specific activities and plans.</p>
Next Steps (During 2019)
Subject to agreement and approval from local authorities and health organisations, local health and wellbeing board input and democratic accountability in the strategic planning of health, care and wellbeing to be established.
Measures of Success
<p>Democratic accountability in strategic planning, with appropriate member representation.</p> <p>An explicit link between JSNA challenges, JHWS priorities and commissioning plans.</p> <p>A line of accountability between the health and wellbeing board and strategic planning.</p>

Objective 6: Increase collaboration between Devon, Plymouth and Torbay Health and Wellbeing Boards

Description
<p>The Devon STP area comprises of three Health and Wellbeing Boards (Devon, Plymouth and Torbay). Whilst board priorities and processes will be tailored to local needs and circumstances, the need for closer working between the three boards on issues of common interest where they can strengthen and support local action was raised through conference discussions.</p> <p>Options for increased collaboration which have been used in other areas include:</p> <ul style="list-style-type: none"> • alignment of evidence base and developing complementary approaches to priority setting and the assessment of need (JSNA and JHWS) • collaboration on specific issue and campaigns, particularly at STP level. • the development of more formally aligned processes, meetings and agendas with shared accountability for wider processes. • the establishment of a forum where the three boards could meet and collaborate (e.g. Greater Manchester Health and Social Care Strategic Partnership Board).
Initial Actions (by December 2018)
Use proposed organisational development session (objective 5) to identify other opportunities for collaboration across local boards
Next Steps (During 2019)
Subject to approval from three local authorities, steps to increase board collaboration agreed and put into practice.
Measures of Success
<p>A complementary evidence-base improving the identification of current and future needs and priorities.</p> <p>Shared processes in place to allow for collaboration between boards and across the local health, care and wellbeing system.</p>

4. Conclusion and Next Steps

4.1 These objectives for board development reflect stakeholder discussions and define actions for the board to align more closely with other strategic partnerships, develop an expert network, support work at a local level, strengthen its assurance role, establish its system role in strategic planning, and increase collaboration with other local health and wellbeing boards. This enhanced role will require additional officer support to realise, and board members will be expected to enable this by ensuring appropriate officer input from their organisations and teams, as well as actively and directly supporting actions as members of the board. Once approved, initial actions will be started and reported back at the December 2018 Health and Wellbeing Board meeting.

5. Legal Considerations

There are no specific legal considerations identified at this stage.

6. Risk Management Considerations

Not applicable.

7. Options/Alternatives

Not applicable.

8. Public Health Impact

The ongoing development of the Health and Wellbeing Board is vital to addressing public health issues in Devon, the wider determinants of health, health inequalities and a focus on prevention

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Background Papers

Nil

Appendix 1, Full Summary of Table Feedback from Devon Health and Wellbeing Stakeholders Conference, June 2018

PRIORITIES SESSION

VISION

Are the vision of the board and priorities in the current Joint Health and Wellbeing Strategy still appropriate?

The general theme is that the vision and priorities are broadly in the right place but could be a lot clearer and better expressed.

Whilst the general sentiment of the vision was thought to be good it was felt that the language could be a little paternalistic and there was a need to shift from a 'professional gift' stance to doing what matters to people.

For particular statements such as a 'focus on the individual' and 'all resources and assets in places must be used to support the wider determinants of health' it was felt we had to unpack what we mean and there was a general feeling that plainer English was required throughout.

Further elements to strengthen in the vision and priorities include:

- We need to be explicit about inequalities
- The emphasis should be clear on prevention and early intervention
- Prosperity, community cohesion and home environment should feature prominently
- We need to work across spheres of responsibility and organisations and avoid service silos and dead ends.

A particularly useful suggestion around reframing the vision was to make it about creating the right conditions to deliver what matters to people.

EMPHASIS

What would you like to see emphasised in the 2019-22 Joint Health and Wellbeing Strategy?

A general theme emerging from discussions was to focus on areas with poorer outcomes and particular challenges in Devon rather than trying to cover all bases.

In relation to style, accessibility to lay audiences and stakeholders was highlighted as particularly important, as well as ensuring that community perspectives on needs, issues, and 'what matters to you' were included to shift away from a tendency towards paternalism and learned helplessness.

There was a recurrent theme about encouraging flexibility with resources. A greater focus on the wider determinants of health was also encouraged.

Some tables also highlighted the need for a dedicated action plan to deliver objectives.

In relation to particular topics and issues to focus on the following were emphasised or occurred on multiple tables:

- Mental Health and the relationship with poorer physical health
- Physical activity (as a specific means to better physical and particularly mental health)
- Health inequalities
- Rurality and access to services
- Home environment / housing
- Workforce
- Economic development and inclusive growth
- Disability and poorer health outcomes (currently falls between existing priorities)
- Health literacy

ALIGNMENT

How should the Joint Health and Wellbeing and STP strategies be aligned?

The general sentiment is that there should be explicit read across between the strategies. Whether they were complementary strategies or a single strategy was a subject of debate, but the need for consistency was common.

The need for Health and Wellbeing Board priorities and a focus on the wider determinants of health to be reflected across STP work programmes was highlighted.

Alignment of priorities across the three Health and Wellbeing Boards in the STP was highlighted, and it was reflected in some discussions that board priorities should more explicitly direct STP work.

Some discussions focused on the need for a more explicit link between HWB priorities and STP plans, with some reiterating the suggestion that a specific plan for the delivery of the Joint Health and Wellbeing Strategy could be useful.

WORKING TOGETHER SESSION

ROLE

What should the role of the Health and Wellbeing Board be in Devon?

Discussions generally reflected a desire for the board to be further to the right on the integration/collaboration continuum, taking a role in shaping and leading the wider system with a dual focus on influencing the wider determinants of health, and health and care commissioning.

The need for alignment across the three Health and Wellbeing Boards was highlighted by a number of tables, along with ensuring democratic accountability in the STP.

Action focused meetings with a clear action plan and accountability were highlighted, driven by intelligence-based priorities, local evidence and examples of best practice. A focus on a smaller set of priorities and a clear strategic message, with a clear brand was also highlighted. Clear communication and engagement flowing from and going back into the board was also advocated in many discussions, which identified the need to develop community connections and utilise the voluntary and community sector.

There was considerable discussion about the Health and Wellbeing Board either being an 'umbrella' across other forums, or a forum where a wide range of existing partnerships around the wider determinants of health could report into, which could cover areas such as the strategic housing group, strategic planning and community safety. This also extends to Strategic Commissioning functions with some discussions advocating a sub-committee structure focusing on strategy/policy, wider determinants of health and commissioning.

The independent role that the board has was seen as a key strength but there was a call for it to be braver and more critical. This specifically included the board providing a strong challenge to commissioning plans of health organisations, the County Council and district councillors and other organisations to ensure that Joint Health and Wellbeing Strategy priorities are reflected in and addressed through their delivery plans.

There was also a call for more agile governance arrangements, which could potentially involve a more dynamic fluid approach to membership with the board co-opting additional members or specific input for particular pieces of work. The concept of a wider Devon Health and Wellbeing Network enabling a formalised means for stakeholders to support board work and objectives was also advocated as a particular way to avoid one person speaking on behalf of an entire organisations or sector.

One useful synopsis of the potential role from one table was 'to have a strategic overview of the system that gets translated into operational delivery by each of the constituent members'.

Another useful synopsis of the potential role from another was “to set direction, highlight priorities through intelligence, and support development and delivery of plans locally including resources (links in with budgets and commissioning) and best practice”

ACCOUNTABILITY

How should it support democratic accountability?

There was a call for greater political ownership and input, particularly at district level, with links to locality work. There were also calls for democratic accountability through Strategic Commissioning and Local Care Partnerships through the STP.

A Health and Wellbeing Board leaders and Chief Executives meeting was advocated through many discussions, linking work in Devon, Plymouth and Torbay through the STP, three Health and Wellbeing Boards and localities.

There was also suggestion that Health and Wellbeing Boards may also have a role in decision making in relation to health and care spending, and particularly in the shifting of resources towards prevention and community level place-based activities, with further suggestion that some decision making should occur at a sub-STP, sub-board, place-level.

GEOGRAPHY

How do we best make the geography of Devon and its organisations work?

A common theme of discussions was a tiered approach to geography, with a structure focused on the following levels:

STP > Board > Locality > Local Authority District > Town

Through most discussions this was condensed down to:

Board/STP Priorities > Locality > Town

This three-tier model reflects the geographic levels used in wave one Integrated Care Systems such as Dorset, with the town level roughly aligning with the primary care home model, but also reflecting the fact that some towns are very small with geographically vast rural hinterland which will pose their own additional challenges. This was also reflected in observations from some discussions about ensuring that work supported sparse / dispersed communities, and communities of interest as well. A feedback loop was also envisaged with a two-way flow of information and intelligence.

The 29 market and coastal towns of Devon in particular were identified through these discussions as a particularly useful way of conceiving of ‘place’ which also roughly aligns to the presence of GPs, community health services and mechanisms for wider support.

It was also acknowledged that certain forums already existed around towns (in the forms of town partnerships and hubs) and local authority districts (in the form of Health and Wellbeing partnerships), which may already provide some of the elements of a tiered model.

A specific role of the board was highlighted in terms of translating the JSNA and JHWS priorities into key deliverables for communities, with the board acting as a sponsor or champion of place-based developments which it could help steer.