

TRAFFORD COUNCIL

Report to: Health & Wellbeing Board
Date: 17th March 2023
Report for: Information and Decision
Report of: Thomas Maloney, Programme Director Health and Care,
Trafford Council & NHS GM Trafford and Eleanor Roaf,
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Report Title

Trafford Health and Wellbeing Board (HWBB) Governance & 2023-24 Work Programme

Purpose

This paper sets out the background and context of the evolving HWBB and proposes a set of outline governance arrangements to ensure the operational effectiveness of the Board. The paper also asks permission to explore the future state of various forums and groups to maximise collaboration and inter-disciplinary working across sectors in pursuit of better outcomes for people and communities of Trafford.

The paper also contains a draft 23/24 work plan based on existing and new priority programmes of work, including statutory duties of the HWBB.

Recommendations

Trafford HWBB are asked to:

- a) Support the continuation of the existing chairing arrangements
- b) Reconfirm existing HWBB membership and agree to the additional representation from the listed sectors
- c) Agree the draft Annual Work Plan (23/24) and reporting arrangements
- d) Agree to strengthen the connectivity of the HWBB to other forums/groups and explore the sub-governance of the HWBB as outlined in the report
- e) Agree to the refresh of the HWBB Terms of Reference
- f) Note the support arrangements for the HWBB

Contact person for access to background papers and further information:

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1. Background and Context

- 1.1 New Health and Wellbeing Board (HWBB) guidance was issued in November 2022: [Health and wellbeing boards: guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/health-and-wellbeing-boards-guidance), describing the expectations of HWBB's, and their relationship with Integrated Care Boards (ICB) and Locality Boards. The guidance sets out the roles and duties of HWBBs and clarifies their purpose within the new system architecture.
- 1.2 Prior to this, between March and June 2022 the Local Government Association (LGA) carried out an independent review of Trafford's HWBB. The overarching strategy of the HWBB of reducing inequalities in premature mortality and healthy life expectancy remained unchanged, but the LGA recommended that a more structured approach was taken to the five key priority areas for the Board, with high impact actions to be identified and progressed by all HWBB partner organisations.
- 1.3 Following this recommendation, 'deep dives' were undertaken on our agreed priorities of the refreshed HWBB Strategy, these were: Physical Activity; Healthy Weight; Alcohol; Tobacco; Mental Health Transformation.
- 1.4 The deep dives identified several multiagency actions for the HWBB to own and progress in partnership, alongside further single agency actions. In February 2023 the HWBB agreed to this programme in principle, and asked HWBB members to identify organisational leads who will work with the subject matter experts and the H&SC PMO team to develop SMART (Specific, Measurable, Achievable, Realistic, Timebound) targets for each.
- 1.5 This work is now underway, but to maximise impact and reduce duplication, it is timely to establish the governance arrangements for the HWBB and its relationship with the Locality Board and other key forums in the borough.
- 1.6 The Trafford Locality Board (TLB) has recently agreed its preferred governance model and has submitted this position to Greater Manchester Integrated Care Board (GM ICB) for formal approval. If accepted by GM ICB at the March meeting the new arrangements will come into effect as of April 2023. It is important to note HWBBs continue to play an important statutory role in instilling mechanisms for joint working across health and care organisations and setting strategic direction to improve the health and wellbeing of people locally. Therefore, the relationship with TLB will be pivotal in channelling our collective efforts to improve outcomes for Trafford people.

2. Roles and Responsibilities

- 2.1 HWBBs remain a formal statutory committee of the local authority, and will continue to provide a forum where political, clinical, professional and community leaders from across the health and care system come together to improve the health and wellbeing of their local population and reduce health inequalities.

2.2 The Health and Care Act 2022 did not change the statutory duties of HWBBs as set out by the 2012 Act. Instead, it supplemented these with the establishment of new NHS bodies known as Integrated Care Boards (ICBs) and required the creation of Integrated Care Partnerships (ICPs) in each local system area. Trafford Locality Board (TLB) provides this function in our area. Trafford HWBB, working alongside TLB and other key locality forums, will continue to:

- Provide a strong focus on establishing a sense of place
- Instil a mechanism for joint working and improving the wellbeing of their local population
- Set strategic direction to improve health and wellbeing

2.3 The previously referenced guidance sets out the roles and duties of HWBBs and clarifies their purpose within the new system architecture introduced by the 2022 Act. The HWBB should support ICB and ICP leaders, local authorities and HWBBs to understand how they should work together to ensure effective system and place-based working, following the principle of subsidiarity.

2.4 Within the confines of the Act and guidance, the following work programmes / areas fall within the responsibility of the Board:

- Sign off the localities Better Care Fund (BCF) Plans
- Development and publication of a Joint Local Health and Wellbeing Strategy (JLHWS) – Trafford HWBB Strategy
- Development and publication of a Joint Strategic Needs Assessment (JSNA)
- Publication of the Director Public Health's Public Health Annual Report for the borough
- Development of a Pharmaceutical Needs Assessment (PNA)
- To receive an annual report on Health Protection in the locality:
- Consider ICP Strategy
- Consider ICP Joint Forward Plan (JFP)
- Consider ICP Annual Reports
- Receive and consider ICBs and their partner NHS Trusts and NHS Foundation Trusts joint capital resource use plan
- Be consulted on the Performance Assessment of the ICP

2.5 The above list is not exhaustive but meant to highlight the key statutory work areas and programmes that will need to be progressed by the HWBB throughout the course of the municipal year. In addition to the above locally identified priorities will be integrated into the work plan of the Board – further detail is captured in Section 7.

2.6 It is envisaged the HWBB will offer a reciprocal peer challenge and support role to other parts of our local system and offer its support in pursuit of a joint continuous

improvement model – positively addressing our areas for improvement and addressing our known inequalities.

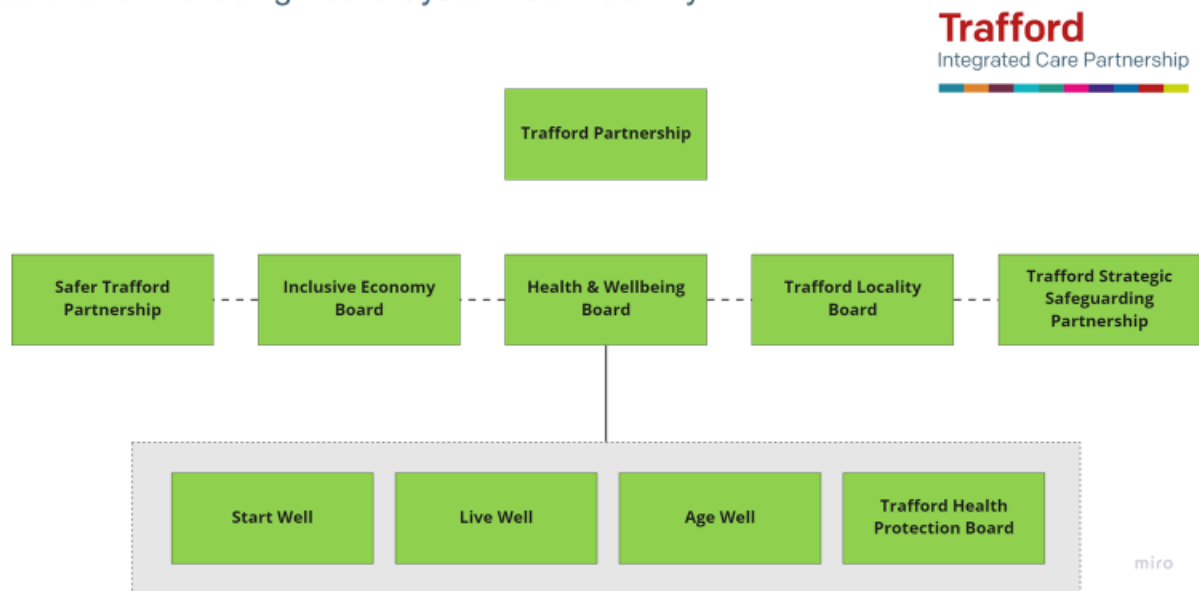
- 2.7 To support the changes in responsibilities and our targeted work plan model it is proposed the Terms of Reference (ToR) for the HWBB is fully reviewed and updated and brought back to the next meeting of the Board.

3. System Connectivity

- 3.1 It is envisaged that there will be a close relationship between the HWBB and TLB, with TLB being the delivery vehicle for the ICP Strategy, while the HWBB will be the custodian of the locality contribution to the GM ICP Strategy. Within this, the HWBB will pay particular attention to the reduction of internal health inequalities in the borough, which might not be identified at a GM level, and will ensure that TLB delivery is cognisant of and responsive to these.
- 3.2 It is suggested Trafford HWBB works with GM ICP and GM ICB to determine the integrated approach that will best deliver holistic care and prevention activities, including action on wider determinants in Trafford's communities.
- 3.3 HWBBs will now be required to consider revising their JLHWS following the development of the integrated care strategy for their area (Local Government Act 2007) but are not required to make changes. At this time, it is not recommended we update our Trafford HWBB Strategy, as we have recently reviewed and confirmed this. However, we reserve the right to revisit this position if after publication of the GM ICP Strategy we feel it necessary to do so.
- 3.4 System connectivity of the HWBB at locality level is imperative if the HWBB is to be successful in addressing the needs of our population and delivering its agreed strategy. Diagram 1 below is an organogram of the HWBB and its associated governance as it currently operates.

Diagram 1:

Health and Wellbeing Board System Connectivity



- 3.5 The organogram showcasing the TLB and its associated governance and produced as part of the formal submission to GM ICB can be found in Appendix 1. It is important to note the HWBB may have direct connections to other forums such as Trafford Provider Collaborative Board (TPCB) and Trafford Clinical and Practitioner Senate (TCAPS) and will need to remain flexible with its connections, formal and informal, to deliver against the proposed 23/24 work plan.
- 3.6 The Board is asked to support operating on the principles of enhancing existing forums, reduce duplication and creating new partnerships where required. In order to capitalise on the emergence of new governance arrangements and ascertain further clarity on the role of the HWBB, the Board is asked to provide the mandate to:
- Enhance the connectivity of the Start Well Board
 - Explore the future role of Live Well and Age Well Boards
 - Explore other thematic forums and groups that could / should have formal reporting arrangements, particularly those that play a significant role in addressing the priorities of the HWBB 23/24 work plan
- 3.7 How we wish the HWBB to connect across the system, acting as the facilitator and influencing board to others, is very much within our gift, but it should be recognised that the HWBB has a role in picking up and escalating issues relating to the wider determinants of health, to help create an environment and system that improves

health outcomes. The HWBB will need to create clear lines of communication with a variety of groups and adopt shared protocols and governance for this.

4. Membership

- 4.1 The membership of HWBB is very much for local determination, with only 6 identified roles required by statute.
- 4.2 Trafford HWBB has an extensive membership but following the publication of guidance, it is suggested all HWBBs should review their membership following the establishment of ICBs and ICPs and their associated functions and duties. It therefore feels opportune to explore our current membership arrangements and review the membership list against a backdrop of the updated responsibilities and emergent local priorities through the deep dive process.
- 4.3 It is recommended that we reconfirm existing membership and named individuals where required. In particular we wish to confirm clinical representation and it is proposed this will be provided by the NHS GM Trafford Associate Medical Director (AMD). It is important to note the HWBB wishes to have Primary Care provider representation and we recommend this be sought from Trafford GP Board (See 4.4).
- 4.4 It is also proposed we make appropriate additions ensuring the Board has appropriate levels of reach and influence to enable the Board to deliver its functions. To strengthen the current membership, we propose representation from the following organisations / sectors:
- Trafford Council Place Directorate
 - Trafford GP Board
 - Leisure
 - Social Housing
- 4.5 The HWBB is asked to support identifying the correct individuals from the listed sectors. It is of utmost importance to ensure there is clarity regarding the role and responsibilities of Board members in order to secure the correct individuals / designations to the Boards membership.
- 4.6 Any changes or additions to the membership will reflect our local circumstances and priorities and continue to meet the statutory requirements.
- 4.7 The HWBB is asked to support identifying the correct individuals from the listed sectors.

5. Chairing Arrangements

- 5.1 Prior to the existence of the ICS the Chairing of the HWBB was enacted on a rotating basis between the Executive Member for Health and Wellbeing and Equalities and the Clinical Commissioning Group (CCG) Governing Body Chair. These arrangements

were suspended on July 1st as the ICS was introduced and since this time the Executive Member for Health and Wellbeing and Equalities has taken the Chair role.

- 5.2 The Executive Member for Health and Wellbeing and Equalities represents Trafford on the GM ICP and is therefore uniquely positioned to strengthen the connectivity of the HWBB with GM governance and our local system governance.
- 5.3 The HWBB is asked to support the continuation of the existing chairing arrangements. The commitment to review the HWBB ToR will allow us to periodically review our governance arrangements including that of the Chair role.

6. Meeting Frequency and Support

- 6.1 It is proposed the HWBB will meet 6 times per year in May, July, September, November, January, and March – where required avoiding pre-election periods and holiday periods that may affect attendance.
- 6.2 The rationale behind the meeting frequency is twofold. Meeting the equivalent of bi-monthly will allow the HWBB to discharge its statutory duties in an effective and timely manner whilst also allowing the Board to receive 5 thematic reports linked to the HWBB Strategy and Deep Dive Action Plan (See section 7) and an annual progress report. It will also allow effective connectivity to the TLB and enable the HWBB to provide support and/or escalate any issues to other forums in a timely manner. The sequencing of the HWBB will be looked at closely and managed as effective as possible to ensure a smooth reporting between key forums is in operation.
- 6.3 Democratic services will administer the HWBB and provide the necessary coordination support to the HWBB, organising venues and practical meeting arrangements. Democratic services are currently securing meeting dates for the municipal year 23/24 and these will be communicated with members as soon as possible. Best efforts will be made to ensure sequencing of the HWBB aligns where feasible with other key local and GM forums to strengthen reporting and timeliness of updates, decisions, and escalations.
- 6.4 It is proposed the H&SC PMO provide the appropriate support to monitoring the delivery of objectives and the annual work plan and provide strategic coordination support to key governance forums across Trafford.

7. HWBB 2023/24 Work Plan

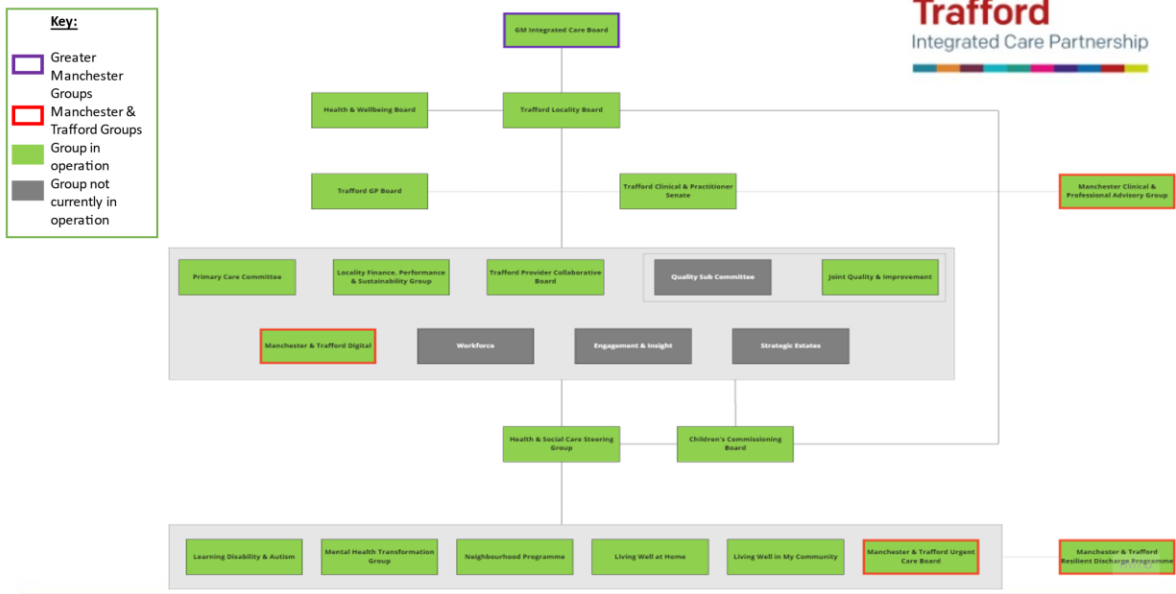
- 7.1 At the January meeting the HWBB supported a set (n14) of high-level actions which were derived from the deep dive workshops / process completed in 2022. For ease of reference the deep dive areas were:
 - Physical Activity

- Healthy Eating
- Smoking
- Mental Health
- Alcohol

- 7.2 The actions were agreed to form part of the Boards workplan for 23/24 and for the actions to be turned into a set of SMART actions – the full set of SMART plans can be seen in Appendix 2.
- 7.3 SMART is an acronym used to describe the process of setting goals. The acronym stands for the words “specific,” “measurable,” “achievable,” “relevant” and “time-bound,” which are essential traits of setting objectives. The SMART method provides a way to measure your progress and be accountable for your success.
- 7.4 Each of the agreed actions across the 5 deep dive areas will form the basis of the HWBB performance targets. Progress will be reported periodically to the HWBB (And other forums where appropriate), with monitoring and exception reporting being undertaken by the H&SC PMO team and escalated to the HWBB and other forums as required. It is proposed that where feasible the priority work programmes will be managed through PM3, which is a programme management software tool used within the Councils modernisation team – thus allowing robust and efficient reporting as and when required throughout the year.
- 7.5 A combination of the SMART action plans and the refreshed responsibilities listed in section 4 will form the basis of the HWBB Work Programme for a municipal year. It is proposed the HWBB remains flexible to emergent work and priorities and has the bandwidth to respond to unknown priorities that may present themselves. Further details will be captured in the proposed refresh of the HWBB ToR.

Appendix 1:

Trafford Integrated Care Partnership System Governance



Appendix 2:

INSERT SMART ACTION PLANS