

Report to:	Health and Wellbeing Board
Relevant Officer:	Traci Lloyd-Moore, Health and Wellbeing Board Policy Officer, Blackpool Council
Date of Meeting	9 th July 2014

Health and Wellbeing Board Development Update – Local Government Association, Action Learning Set, June 2014

1.0 Purpose of the report:

- 1.1 To receive a summary report on the Local Government Association Action Learning Set held in June 2014.

2.0 Recommendation(s):

- 2.1 The Board is asked to note the report.

The Board is asked to consider the key discussion points and identify any future actions.

3.0 Reasons for recommendation(s):

- 3.1 The Board has made a commitment to undertake a programme of learning which is both developmental and strategic in scope to ensure it continues to provide leadership for health and well-being at the highest level. The Local Government Association's Action Learning Sets provide further support to Local Authorities and Health and Wellbeing Boards who have taken part in their Health and Wellbeing Peer Challenge Programme in developing in their system leadership role.

- 3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

- 3.2b Is the recommendation in accordance with the Council's approved budget? Yes

- 3.3 Other alternative options to be considered:

As outlined in the reasons for recommendations there are no other suitable

alternative options.

4.0 Council Priority:

4.1 The relevant Council Priority is:

- Improve health and well-being especially for the most disadvantaged

5.0 Background Information

- 5.1 The LGA has made an ongoing commitment to sharing learning and best practice with the wider sector. As part of this commitment the LGA have set up Action Learning Sets for local authorities and their systems where health and wellbeing peer challenges have been completed to enable further shared learning.
- 5.2 An initial Action Learning Set took place in March 2014 attended by the first cohort of local authorities that had completed the health and wellbeing peer challenge and included representatives from Camden, Bath and North East Somerset, Merton, Leicester, Solihull, Southend and Doncaster. Themes covered, health and wellbeing board governance; developing relationships; how to manage focus on delivery; increasing visibility of health and wellbeing boards and measuring performance
- 5.3 Based on the success of the first Action Learning Set, a second session was held in June for Local Authorities that had completed the health and wellbeing peer challenge in 2014 attended by representatives from Blackpool, Sunderland, Sefton, Cornwall, Bristol, Peterborough and the Isles of Scilly. Themes explored included:
- Leading the whole system (The Board, partners, other stakeholders and local people)
 - Upstream and downstream (The wider determinants, health behaviours, health improvement, health protection)
 - Implementation (Leverage and implementation, delivery plans, scale and pace)
- 5.4 The LGA have produced a summary report outlining the main areas of discussion, which is attached as Appendix 3a. Some of the key points are detailed below:
- The Health and Wellbeing Board meeting is the 'tip of the iceberg' and a lot of work needs to be conducted outside formal meetings.
 - Having shared accountability requires all partners to understand each others' operational challenges and constraints as well as values and norms. It requires enthusiastic and energetic leadership from Leaders and Chief Executives of all partners.

- All partners should make financial contributions to maintaining the Board infrastructure and its development.
- Difficulty in achieving a balance between the integration of health and social care to deal with immediate financial pressures, quality issues and promoting well-being.
- Public Health England and the LGA need to do more and better influence ministers and local members about the impact of poverty on health.
- Voluntary and community sectors are a key means to build local resilience.
- The Board's key outcomes need to be owned by multiple stakeholders as opposed to single organisations. In some areas, senior managers have signed up to 'pledges' of what they will do for the Health and Wellbeing Board.
- Children and Young People have to feature more prominently in the work of the Board and that it needs to engage with schools that are instrumental in helping children to develop high expectations and achieve.
- In asking participants to think about the future – some saw the future Health and Wellbeing Board as an integrated commissioning board who can manage the entire spend across health and care and act as the civic face, accountable for the conversation about better health and wellbeing for local people.

5.5 Authorities and Health and Wellbeing Boards are encouraged to consider and where appropriate apply the learning from these discussions as part of their ongoing development and in taking forward their peer challenge recommendations.

5.6 The LGA aim to run further Action Learning Sets over the forthcoming year with follow up activities planned for the first two cohorts.

Does the information submitted include any exempt information?

No

List of Appendices:

- Appendix 3(a) LGA Action Learning Set Summary Report June 2014

6.0 Legal considerations:

6.1 None

7.0 Human Resources considerations:

7.1 None

8.0 Equalities considerations:

8.1 None

9.0 Financial considerations:

9.1 None

10.0 Risk management considerations:

10.1 None

11.0 Ethical considerations:

11.1 None

12.0 Internal/ External Consultation undertaken:

12.1 None

13.0 Background papers:

13.1 None