

WIRRAL SHADOW HEALTH & WELLBEING BOARD

Meeting Date	14 December 2011	Agenda Item	5
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Report Title	Shadow Board Development Plan – Building the Platform
Responsible Board Member	Director of Public Health

Link To Shadow HWB Function	Board development		✓	
	JSNA/JHWS			
	Health and social care integrated commissioning or provision			
	Other (please specify, referring to the TOR)			
Equality Impact Assessment Required & Attached	Yes	No	N/A	✓
Purpose	For approval	✓	To note	To assure

Summary of Paper	This paper outlines the main development programmes that the Board will undertake in its initial shadow year.		
Financial Implications	Total financial implication	New investment required	Source of investment (e.g. name of budget)
	£ 40,000	£ none	This is funding received to be spent on facilitation support from the National Leadership Council under its Place Based Leadership programme
Risks and Preventive Measures	Engagement with the development activities. In order to mitigate against poor engagement from the membership, all members of the board have been asked to nominate themselves to be involved in the work of particular development projects.		
Details of Any Public/Patient/Service User Engagement	Community engagement is one of the proposed development projects		
Recommendations/Next Steps	<ol style="list-style-type: none"> 1. That the development programmes and member links are agreed. 2. That the leads for each programme should work with our assigned facilitators to take the project forward. 3. That progress reports on each of the projects should be received at the Health and Wellbeing Board on a quarterly basis. 		

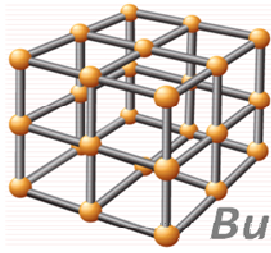
Report History		
Submitted to:	Date:	Summary of outcome:
Development session of Health & Wellbeing Board	17/11/11	This final draft was considered at the Board
List of Appendices		

Publish On Website	Yes	✓	Private Business	Yes	
	No			No	✓

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Building the Platform

A Placed Based Leadership Project to develop the
Wirral Health and Wellbeing Board


1. Background

Introduction

On the 21st September the Wirral Health and Wellbeing Board (HWB) held its first development meeting in shadow form. Wirral had been successful in becoming one of small number of pilot sites for a 'place based leadership' (PBL) initiative sponsored by the National Leadership Academy. In their application Wirral planned to use the resources provided through the PBL project to help establish their Health and Wellbeing Board. The Wirral project – given the working title of 'Building the Platform' – was initiated with a series of telephone interviews with senior managers and professionals from local government, health and third sector agencies across the peninsular.

During its initial development meetings the Board members have considered a report prepared by Professor Laurie McMahan (from Loop2 – one of the two providers selected for the Wirral PBL project. The other facilitator allocated to the Board is Bruce Havelock, from the company GE) which looked at perceptions about partnership working, the expectations about roles and relationships around the new HWB and the PBL issues that might be tackled through the programme.

By the end of the meeting these had been narrowed down to six candidate *Building the Platform* projects – set out below:



Ideas about PBL programme – now 

(preferred approach to PBL : 'learning by doing')

Adopted PBL Projects

1. 'Bench Test' – a process about making difficult decisions
2. 'Producing the Joint Plan' – JSNA to JHWB
3. 'Extending Engagement'
4. Service Reshaping – e.g. Long Term Conditions
5. Public Health Programme – e.g. Healthy Workplace or Alcohol
6. Developing New Leadership Behaviours for the Board for our staff

(revised after the Board discussion)



This short report outlines the areas of work that might be progressed through the PBL programme. This follows.

2. Candidate Projects

There was agreement that the most productive approach to developing the confidence and competence of the Board would be through 'action learning'. The following six themes have emerged as appropriate candidates for inclusion in the Building the Platform project and the resources that go with it. The general approach to each of these was discussed but set out below is a more detail about how best they can be delivered.

2.1 *Making Difficult Decisions*

In the interviews undertaken with stakeholders there was reference to the effects of the Wirral 'double whammy' of demographic change driving up demand occurring at the same time as a rapidly deteriorating financial situation for both the health and local authorities. This would mean that from its inception, the HWB – with a new membership and remit - would have to make some extremely tough strategic decisions - the like of which had not been previously experienced. It was felt best if the leaders represented on the Board could develop their ability to handle such decisions in a safe but realistic learning environment during the shadow phase rather than wait until real lives and real resources were involved.

The '*Making Difficult Decisions*' or *MDD* process has been developed by Loop2 for just these situations. It involves using an imaginary setting and a series of highly realistic scenarios or dilemmas of the type that will be faced by the Wirral HWB. Each dilemma is backed by sufficient information about the context and the evidence to inform the deliberations of Board members. With the help of expert facilitation they work together to decide how best the issue should be resolved. As the members work through the dilemmas a workable approach to decision making emerges based on a better understanding of each others' values and mindsets and the principles and priorities of their host organizations. This outcome will be carefully documented, but the real value of the process is that it provides a safe, pragmatic and reliable way to improve place based decision making and to prepare placed based leaders for making difficult decisions for real. The *MDD* process will require a morning or afternoon.

2.2 *Board Leadership Behaviours*

It was suggested during the meeting that as the HWB was a new arrangement, new relationships and ways of working together would need to be established at an early stage.

It was felt that a rigorous process was required to develop a 'memorandum of understanding' between the members about their behaviour both inside and beyond Board meetings. A process will be prepared for consideration by the Board.

2.3 *The Joint Strategic Needs Assessment and the Joint Health and Wellbeing Plan.*

It was clear that the JSNA should provide the evidence base for the Joint HWB Plan. This PBL project is about developing a robust planning cycle that moves from the JSNA to a HWB plan, through to implementation and on to evaluation.

This is a complex process that needs to be carefully planned. As the first stage Loop2 will design and run a facilitated (half day) planning workshop for a range of local leaders to establish - in collaboration - what needs to be done and by whom. The existing Joint Strategic Needs Assessment Executive Board members will be involved in, and provide leadership to this project.

2.4 *Extending Engagement*

A recurrent theme in the interviews was the need for the Board to find ways of going beyond the current (and quite successful) engagement mechanisms and deliberate directly with the public about health and wellbeing issues *before* attitudes became polarised. It was suggested that it would be difficult to make or implement 'difficult decisions' unless the public were informed about the issues and generally accepting of the need for change. Loop 2 would design and facilitate a 2-3 hour meeting in which a group of relevant local leaders (supported by specialist expertise) would consider the issues, learn from previous experience on the Wirral and establish how the depth and reach of the Board's public engagement could be extended. The output would be a full development proposal to be brought to a subsequent meeting of the Board. This engagement strategy meeting would take 2-3 hours.

2.5 *Understanding how the Health & Wellbeing Board can support the reshaping of services*

It was evident from the interviews that members anticipated that there would have to be quite radical service redesign in order to increase productivity without an undue loss of service quality or access. Although the managing the reconfiguration itself was not seen as part of the Board's role, the development of a shared understanding of the need for change and a common agreement about the integrated change strategy required was seen as central to the Board's function. Developing such a strategy can only be achieved through a process of structured negotiation between stakeholders. It was suggested that we run a demonstration project that draws on Loop2's experience and expertise to learn how to do this. Long term conditions (or specific LTC services) were seen as a good service to serve as the focus for the reconfiguration project.

The design would be bespoke to the LTC services selected and to Wirral's circumstances. It was suggested that a small design group consisting of Board members and others meet for 2-3 hours to develop an outline process for Board approval. Loop2 would then support the Board in the process of developing with stakeholders - especially users, their families and the clinicians and carers involved - a shared reconfiguration strategy.

2.6 *The Public Health Programme*

Two aspects of this emerged during the meeting. The first was the need for the Board to learn how to work together and combine resources to address the stark inequalities that existed on the Wirral. It was suggested that an approach that supports the development of a 'wellness' services approach would be valuable. Within this, particular public health issues may be addressed in more depth.

Linked to this is the transition of public health from an NHS function to a fully integrated health and wellbeing function within the Council. This provides an opportunity to realise the full implications of a move towards 'place based public health' where the public health issues of prescribed communities are addressed together. We suggest that we run a half day design workshop with public health people and others in order to establish how the transition might best be managed.

3. Other Issues and Next Steps

The next step is for these outline proposals to be developed into a fuller delivery plan with timescale and outputs. It was agreed that members of the Board would indicate which of the projects they would like to be involved in and sponsor. All project sponsors would be accountable to the Board for their project's progress and the delivery of the outcomes.

Board members have indicated their interest in involvement with the projects as shown in the table below.

Project	Project Sponsors and Member Leads
'Making Difficult Decisions	Sheena Cumiskey
Board Leadership Behaviours	Sheena Cumiskey
JSNA and the Joint Strategic Health Strategy	Fiona Johnstone
Extending Engagement	Annette Roberts, Sheena Cumiskey
Understanding how the HWB can support the reshaping of services	Sheena Cumiskey
Public Health Programme and Transition	Fiona Johnstone

It was also agreed that members should indicate which order they felt the projects could be addressed in. A suggestion from one of the Board members has been received, which is as follows:

Board Leadership Behaviours
Making Difficult Decisions
JSNA and the Joint Strategic Health & Wellbeing Strategy
Extending Engagement
Public Health Programmes and Transition
Understanding how the HWB can support the reshaping of services.

Clearly a number of these might run in parallel, but it was felt that the reshaping of services should be addressed following the building of relationships and determination of priorities for the HWB.

It is requested that Board Members agree both their project links and the order in which the projects should be addressed at the formal meeting.