

TITLE	Health Overview and Scrutiny Committee, Health and Wellbeing Board and Healthwatch Wokingham
FOR CONSIDERATION BY	Health Overview and Scrutiny Committee on 11 September 2013
WARD	None Specific
STRATEGIC DIRECTOR	Julie Holland, Interim Head of Business Assurance and Democratic Services

OUTCOME / BENEFITS TO THE COMMUNITY

To ensure that the Health Overview and Scrutiny Committee has a better understanding of the roles and responsibilities of the Health and Wellbeing Board and Healthwatch Wokingham and the interdependencies between the three bodies. This in turn will help develop constructive working between the three bodies, to the benefit of residents.

RECOMMENDATION

That the Committee

- 1) consider and note the model of interdependence between the Health Overview and Scrutiny Committee, the Health and Wellbeing Board and Healthwatch Wokingham (Appendix A) and the roles and responsibilities of the three bodies and example questions (Appendix B).
- 2) seek the views of the Health and Wellbeing Board and Healthwatch Wokingham on the model (Appendix A) and the roles and responsibilities of the three bodies and example questions (Appendix B).

SUMMARY OF REPORT

As the health and social care landscape develops and changes it is vital that the Health Overview and Scrutiny Committee, Health and Wellbeing Board and Healthwatch Wokingham develop a constructive and effective relationship.

Each body has a different role to play in reducing health inequalities and ensuring the best possible health and wellbeing outcomes for residents are achieved. The bodies should be aware of each other's roles to enable them to complement each other's work whilst ensuring that duplication is minimised and that important issues are not missed.

A joint workshop was held between members of the Health Overview and Scrutiny Committee, the Health and Wellbeing Board and representatives from Healthwatch Wokingham on 5 June 2013 for the purpose of the three bodies discussing how they would work together in the future.

Background

The objectives of the workshop were as follows:

1. To develop a common understanding of the respective roles of Healthwatch, the Health Overview and Scrutiny Committee and the Health and Wellbeing Board in Wokingham, and to enhance the relationships between their members.
2. To explore and validate the interdependencies between the various groups to act as a basis for future working arrangements.
3. To test these working arrangements with several scenarios to ensure that they are sufficiently robust to deal with a challenging local issue.

Participants were divided into mixed groups and discussed:

- Working together and what difference they would like to make for residents.
- The main priorities for working together for the next year.

Participants received information regarding each of the body's key roles and considered a proposed model which outlined the interdependencies between the three bodies (Appendix A).

Each group considered hypothetical scenarios against the following questions to test this model:

- What do you think the respective roles should be in this scenario?
- What questions should the Health and Wellbeing Board, Healthwatch and the Health Overview and Scrutiny Committee each seek to answer in this scenario?

Next steps

Appendix B sets out a summary of the roles and responsibilities of the Health Overview and Scrutiny Committee, the Health and Wellbeing Board, and Healthwatch Wokingham; example questions for particular situations and points to note. This is to help increase understanding of the different roles and responsibilities in order to further develop an effective relationship between the three bodies.

The Health Overview and Scrutiny Committee, Health and Wellbeing Board and Healthwatch Wokingham should be aware of each other's work and be willing to share information where appropriate in a timely manner to minimise duplication and to ensure that important issues relating to the health and wellbeing of the Borough are picked up.

Although it is important for the three bodies to develop a good working relationship it should be noted that each have their own responsibilities and commitments.

Relationships between the three bodies should be based on openness and transparency to ensure success. It is anticipated that the model of interdependencies (outlined in Appendix A) and the roles and responsibilities will change over time and will need to be updated to reflect developments in health and social care. It is therefore proposed that they be reviewed as necessary should there be significant changes to the

health and social care landscape.

FINANCIAL IMPLICATIONS OF THE RECOMMENDATION

	How much will it Cost/ (Save)	Is there sufficient funding – if not quantify the Shortfall	Revenue or Capital?
Current Financial Year (Year 1)	N/A	N/A	N/A
Next Financial Year (Year 2)	N/A	N/A	N/A
Following Financial Year (Year 3)	N/A	N/A	N/A

Other financial information relevant to the Recommendation/Decision

N/A

List of Background Papers

N/A

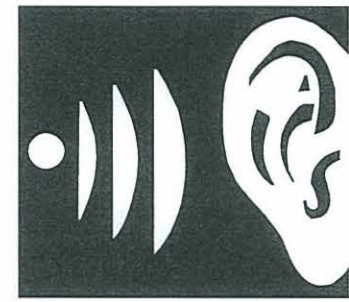
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Overview & Scrutiny
Management Committee and
Council

Council



Held to account by



Highlights concerns to

Member Of

Scrutiny
Holding to account
Considering matters referred

Strategic leadership for health and wellbeing
Develop Needs Assessment & Health & Wellbeing Strategy
Encourage close working health and social care

Engagement
Reporting
Signposting
Gathering Evidence



Healthwatch England (a statutory committee of CQC)

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Healthwatch Wokingham

Role & Responsibilities	Example questions	Points to note
<ul style="list-style-type: none"> • Acts as the consumer/community voice and champion; provides an independent voice, especially for the less heard. • Provides a dispassionate and evidence based view of services and people's experiences. • It can share feedback about services with commissioners and providers. • It is not a complaints system (individual organisations should have own complaints system in place) but will listen to people's experiences both positive and negative and identify gaps. Are there groups who are not being listened to/are harder to reach? • It is a key part of the Health and Wellbeing Board to ensure that the consumer voice informs all their work such as the Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWBS). • It can refer items relating to the planning, provision and operation of the health service in its area to the Health Overview and Scrutiny Committee if it has concerns. Any referral made to Health scrutiny by 	<ul style="list-style-type: none"> • What has patients' experience of xxx process/service been? • How has the line of communication been established with patients/families/carers? • What are patients telling us about the current service? • What are patients' views on the proposal for future services? What consultation has taken place? • For incidents: was this an isolated incident, or is a pattern emerging that we need to be aware of? • What support can Healthwatch provide? • Is there anything that we can/should do with patients as a result of the findings of xxx? • What information would you like people to be aware of about the xxx service? • How can we improve information sharing? • What has changed as a result of peoples' feedback and experience? 	<ul style="list-style-type: none"> • Healthwatch Wokingham was incorporated in June 2013 and is supported by Help and Care

<p>Healthwatch must be acknowledged and Healthwatch informed of what action will be taken.</p> <ul style="list-style-type: none"> • Has a direct route to Healthwatch England (part of the Care Quality Commission) if serious concerns are not resolved • Provides a helpline, a web site, has 'Enter and View' powers. • Recommends Patient Opinion as a way of giving feedback about health services. Healthwatch will be informed of comments and complaints made on Patient Opinion and use this as evidence of local people's experiences of health and social care. 		
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Wokingham's Health and Wellbeing Board

Role & Responsibilities	Example questions	Points to note
<ul style="list-style-type: none"> • Priorities and programmes of the Health and Wellbeing Board will be subject to scrutiny primarily by the Health Overview and Scrutiny Committee (or the Overview and Scrutiny Management Committee, the Children's Services Overview and Scrutiny Committee, Community Partnerships Overview and Scrutiny Committee or the Corporate Services Overview and Scrutiny Committee, if more appropriate to their terms of reference). • Can refer matters of concern to the Health Overview and Scrutiny Committee (or other scrutiny committees) for review. • Provides strategic leadership in improving health and wellbeing. Its membership includes key partnership groups, such as the Community Safety Partnership. • Is supported by 6 Partnership Groups who will have responsibility for the implementation of designated programmes within the Health and Wellbeing Strategy. • The Board will monitor the delivery of key actions and priorities within the 	<ul style="list-style-type: none"> • How does the proposed change to the provision of xxx care meet the Wokingham Needs Assessment? • Is the xxx proposal that is being put forward compatible with the Joint Health & Wellbeing Strategy? • Is xxx service being commissioned effectively to meet the needs of the Health & Wellbeing Strategy? Who is the responsible commissioner, and what information do we have about how the xxx service is delivering the priorities? • How do the outcomes compare/benchmark to other areas? • How does what we are considering impact on our goal to reduce health inequalities? • If an incident occurs, is there a pattern or is this an isolated incident? Does it tell us anything about how our priorities and plans might need to change? • What are the benefits of this proposal? • Does the proposal have any potentially negative outcomes? • What is the predicted impact of this proposal on the JHWBS? • What are the costs involved and does 	<ul style="list-style-type: none"> • It has 14 members, including Director of Public Health, four councillors including the Leader, the Strategic Directors of Children's Services and Health and Wellbeing, Wokingham Clinical Commissioning Group, Healthwatch Wokingham, NHS England, the Community Safety Partnership, Place and Community Partnership and Business, Skills and Enterprise Partnership. • The Wokingham Borough Council Health and Wellbeing Strategy 2013-14 was adopted by Council on 18 July 2013. • The key themes of the JHBWS are: <ul style="list-style-type: none"> ○ Promoting good health throughout life ○ Building health and wellbeing into new communities ○ Improving life chances ○ Emotional health and wellbeing ○ Older people and those with long term conditions

<p>JHWBS by the Partnership Groups responsible for the specific action.</p> <ul style="list-style-type: none"> • Develops the JSNA. • Develops the JHWBS. • Encourages closer joined-up working between health and social care. • Ensures that the plans of local and regional commissioners align to meet the agreed priorities of the JHWBS. • Prepares and publish a local pharmaceutical needs assessment. 	<p>this represent value for money?</p> <ul style="list-style-type: none"> • Is there a gap in local provision? Or in a strategy? How are these gaps going to be resolved? Is this a priority area that can be acted on? • What lessons can be learnt from what we now know? Do priorities need to be amended? • How could information sharing or joint working, be improved to enhance delivery of the strategy? • What progress is the xxx partnership group making in the specific areas? 	
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Wokingham Health Overview & Scrutiny Committee

Role & Responsibilities	Example questions	Points to note
<ul style="list-style-type: none"> • Is accountable to the Overview and Scrutiny Management Committee, Council and local residents. • Can review and scrutinise any matter relating to the planning, provision and operation of health services in the Borough. • Does not make decisions but can scrutinise decisions made and make recommendations for improvement for consideration. • It can hold 'responsible persons' (includes NHS Foundation Trusts, CCG, NHS England, local authority and other service providers) to account through powers to obtain information, ask questions in public and make recommendations for improvements that have to be considered. • Can scrutinise the priorities and programmes of the Health and Wellbeing Board. The Health and Wellbeing Board will provide an update to the Health Overview and Scrutiny Committee on a quarterly basis to enable it to fulfil its responsibilities of scrutiny. • It can consider whether proposals 	<ul style="list-style-type: none"> • For incidents (or reviews): <ul style="list-style-type: none"> ○ Why did these incidents occur? ○ Was the response to the incident appropriate? How well executed was the support response in Wokingham? ○ Were there external pressures at the time of the incident that the Committee should be aware of? ○ What lessons have been learnt? ○ What changes have been put in place to ensure that a similar situation does not occur in future? ○ If an action plan is in place, has it been fully implemented? ○ Did all relevant organisations carry out their role effectively, and, if so, how? • When a proposal is being considered: <ul style="list-style-type: none"> ○ How do the proposed changes improve services available? ○ How does the proposed change fit in with local and regional developments? ○ What evidence is available of the positives and negatives of the proposals? 	<ul style="list-style-type: none"> • Ten councillors (politically balanced) with five substitute members. • Meets a minimum of six times a year. • Can undertake site visits to further inform its work. • It can establish Task and Finish Groups to look at specific issues in more depth (typically two a year, meeting around five times).

<p>represent a substantial development of or variation to the local health service. Should it decide that the proposal is not in the interests of local residents, it can refer the matter to the Secretary of State.</p> <ul style="list-style-type: none"> • After a proposal has been implemented, it can consider whether it has delivered the intended outcome, and whether any improvements are required. 	<ul style="list-style-type: none"> ○ Does it represent value for money? • After a proposal has been implemented and has had some time to bed in: <ul style="list-style-type: none"> ○ What impact have the changes had? ○ What recommendations for improvement should now be made? • How does service residents receive benchmark against care elsewhere and/or against best practice? 	
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