

Report of: Director of Public Health

Health and Wellbeing Board	Date: 20 July 2021	Ward(s): All
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SUBJECT: Proposed change to Health and Wellbeing Board agendas**1. Synopsis**

- 1.1 This paper sets out the proposal undertaken in March 2020, prior to the Covid-19 pandemic, which sought to redevelop the workings of the board, with a greater thematic focus on collective problem-solving and action on health inequalities.

2. Recommendations

- 2.1 The HWBB is asked to:

2.1.1 CONSIDER and AGREE a re-balancing of the Board's time towards thematic or deep dive looks into key health inequalities affecting people in the borough; and, if agreed:

2.1.2 AGREE three health inequalities themes are identified each year

2.1.3 AGREE that the subject of the Annual Public Health Report would normally be one of the three themes

2.1.4 AGREE to timetable shorter time slots for routine reports received by the Board

2.1.5 CONSIDER whether the proposed change in emphasis of the Board's time together indicates a change in the core membership

3. Background

3.1 Shortly before Covid impacted in March 2020, the Health and Wellbeing Board carried out a development session to consider the Board's business cycle and way of working. The outcome from the session was a clear desire for the Board to move to a more thematic way of working, with deep dives or more focused sessions on particular topics through the year. The principle indicated changes were:

- Shift the balance of Board time to more thematic and deeper looks into particular priorities around health and wellbeing and inequalities.
- Topics would represent key issues or areas of concern where a deep dive between partners would be beneficial to provide time to explore issues and perspectives, reach shared understandings and potential solutions, and identify collective actions.
- Find a way to manage the regular report cycle into the Health and Wellbeing Board in a way that took up a smaller proportion of the Board's meeting time.

Additional considerations – not directly addressed in the session – relate to the contribution to, and link with, the Fairer Together Partnership's strategic objectives and programme of work; and, if the above changes are agreed, to consider also the composition of the membership of the Board.

3.2 Health inequalities themes

Using the framework or lens of "start well, live well, age well", the Board could identify three themes per year, focused around key strategic priority areas in the JHWS or through the lens of the Fairer Together priorities of Start Well, Live Well, Age Well. The greater part of Board time would be committed to the theme, or a development or similar session could be timetabled to support a deep dive where there was agreement more time would be beneficial. Each identified theme could

- Share and learn from local examples of new approaches and progress towards improving health and wellbeing outcomes in line with our ambitions and commitments, as well as opportunities for learning from beyond Islington
- Explore the current health and wellbeing system issues and challenges from a range of perspectives, including residents, patients and communities, bringing in the experience and contribution of other partners and organisations within the borough
- Use new data, intelligence and insight, including through the HealthEIntent population health data system, to identify and address key issues
- Support the HWBB and system to develop solutions, approaches and ways of working to address health inequalities in order to drive improvement and make sure the borough is a fairer place for all our residents.

The Annual Public Health Report (in next section) is received as a regular report to the Board, but could in itself form the basis of one thematic deep dive each year, as described above.

3.3 Regular reports to the Board

Currently a number of reports are received through an annual cycle – these comprise

- Section 75 reports
- Safeguarding Annual Reports from Children's and Adult's Boards
- Healthwatch annual forward plan and update
- Joint Strategic Needs Assessment updates
- Annual Public Health Report (see above)

There are ad hoc requests from time to time to receive strategies in development or updates for comment or input. Recent HWBB meetings have also received an update on Covid, however this is also covered through the Outbreak Control Board.

On a longer term cycle, there is the need to review and keep up to date the Joint Health and Wellbeing Strategy, although this could also in part be approached as a deep dive or thematic.

Following on from the development session recommendations, a smaller proportion of time would be devoted to receiving these reports. Depending on the nature of the report and the role of the Board in relation to the report, this could be by way of shorter presentations focused on key messages or findings or issues by exception, or to be principally received for information only.

4. Implications

4.1 Financial Implications:

There are no financial implications arising from this report. The measures and recommendations proposed in this report are not currently quantifiable. Any recommendations from this report, if adopted, will need to be expanded upon and reviewed with the financial implications assessed.

4.2 Legal Implications:

Health and Wellbeing Boards established under the Health and Social Care Act 2012 act as a forum in which leaders from the local health and care system can work together to improve the health and well-being of their local population. S.1 of the Care Act 2014 gives the local authority a duty to promote an individual's well-being and s.2 Care Act 2014 provides a duty to prevent needs for care and support.

4.3 Environmental Implications and contribution to achieving a net zero carbon Islington by 2030:

As this proposal is a change to the agenda of existing meetings, there are no environmental implications.

4.4 Resident Impact Assessment:

Please retain this standard paragraph and add relevant text about specific impacts and mitigation below:

The council must, in the exercise of its functions, have due regard to the need to eliminate discrimination, harassment and victimisation, and to advance equality of opportunity, and foster good relations, between those who share a relevant protected characteristic and those who do not share it (section 149 Equality Act 2010). The council has a duty to have due regard to the need to remove or minimise disadvantages, take steps to meet needs, in particular steps to take account of disabled persons' disabilities, and encourage people to participate in public life. The council must have due regard to the need to tackle prejudice and promote understanding.

There are no anticipated impacts of the change on residents.

5. Conclusion and reasons for recommendations

- 5.1 The Board's development session pre-Covid identified the desire to review the balance of agendas and Board time, with more time given to deeper, more thematic approaches to address selected health and wellbeing topics and less on routine business. The recommendations are intended to support the outcomes from that development session.

Signed by:

A handwritten signature in black ink that reads "JEO'Sullivan". The signature is written in a cursive style and is underlined with a single horizontal line.

Jonathan O'Sullivan
Director of Public Health

Date 7 July 2021

Report Author: Effie Argyropoulou / Jonathan O'Sullivan
Tel: 020 7527 1220
Email: Efi.Argyropoulou@islington.gov.uk

Financial Implications Author: Shalem Miah, Senior Finance Officer
Tel: 020 7527 6737
Email: Shalem.miah@islington.gov.uk

Legal Implications Author: Anuara Ali, Senior Solicitor - Community Services (Solicitor-Advocate)
Law & Governance, Resources Directorate
Tel: 020 7527 3122
Email: Anuara.ali@islington.gov.uk