

Health and Wellbeing Board	HWB22/11/12
Date:	22 November 2012

JOINT HEALTH AND WELLBEING STRATEGY – OUTCOMES FRAMEWORK

Report by:

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Purpose of report and Decision Areas and Recommendations	<p>Purpose of Report</p> <p>The Joint Health and Wellbeing Strategy (JHWBS) sets out a vision for improving the health and wellbeing and reducing the health inequalities in Essex.</p> <p>The final stage in the preparation of the strategy is the development of an outcomes framework and assurance process that will:</p> <ul style="list-style-type: none"> • include SMART targets that are owned by the HWB and partner organisations; • enable the Board to be confident that commissioning plans of members build from the Joint Strategic Needs Assessment (JSNA) and are aligned with the JHWBS – specifically so that the Board can sign off the alignment of Commissioning Plans for the CCGs and the Council; • provide a streamlined mechanism for the Board to monitor progress against the strategy throughout its lifetime by retaining a focus on the "whole system". <p>The Board is therefore being asked to agree to the setting up of a Task and Finish Group to carry out this work.</p> <p>Recommendations</p> <ol style="list-style-type: none"> 1. That the Board agrees to set up a Task and Finish Group to carry out stage 3 of the Joint Health and Wellbeing Strategy. 2. That the Board agrees to the development of an outcomes framework and assurance process as outlined in this report. 3. That the Board agrees to the approach for consultation and engagement outlined in this report. 4. That the Board agrees to the outputs for the Task and Finish Group outlined in Appendix 2 of this report.
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Background and context	<p>Introduction The development of the Essex Joint Health and Wellbeing Strategy has been broken down into 3 stages:</p> <ol style="list-style-type: none"> 1. Development of Draft Strategy November 2011 – April 2012 2. Development of Final Strategy May 2012 – September 2012 3. Planning for implementation of Strategy October 2012 – March 2013 <p>Four common strands have shaped the activity in each of these stages, as summarised in the table below:</p> <table border="1"> <tr> <td data-bbox="435 779 948 1048"> <p>Shape & Inform</p> <p><i>Scope, Policy Drivers, Vision, Principles, JSNA, Rationale for Prioritisation, Shared Definitions</i></p> </td><td data-bbox="948 779 1399 1048"> <p>Engagement & Ownership</p> <p><i>Shaping common vision & Principles, setting priorities, getting agreement for core definitions</i></p> </td></tr> <tr> <td data-bbox="435 1048 948 1323"> <p>Publication & Communications</p> <p><i>Stakeholder groups & audiences, key messages, media, Plain language, workforce development</i></p> </td><td data-bbox="948 1048 1399 1323"> <p>Accountability, Delivery & Review</p> <p><i>Roles & Responsibilities, linkages with other strategies, delivery, governance, reporting, review, scrutiny</i></p> </td></tr> </table> <p>The Strategy The strategy was agreed by the Shadow Health and Wellbeing Board at their meeting on 19 September 2012. It is publicly available here.</p> <p>As can be seen from the diagrammatic representation of the strategy (see appendix 1), it is positioned as a high level strategic framework.</p>	<p>Shape & Inform</p> <p><i>Scope, Policy Drivers, Vision, Principles, JSNA, Rationale for Prioritisation, Shared Definitions</i></p>	<p>Engagement & Ownership</p> <p><i>Shaping common vision & Principles, setting priorities, getting agreement for core definitions</i></p>	<p>Publication & Communications</p> <p><i>Stakeholder groups & audiences, key messages, media, Plain language, workforce development</i></p>	<p>Accountability, Delivery & Review</p> <p><i>Roles & Responsibilities, linkages with other strategies, delivery, governance, reporting, review, scrutiny</i></p>
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Proposal	<p>The Outcomes Framework and Assurance Process The final stage in the process of creating the strategy is to produce an outcomes framework and assurance process that all partners, operating collectively as the Health and Wellbeing Board and within their own operational environments, will be able to use. This outcomes framework and assurance process should:</p> <ul style="list-style-type: none"> • include SMART targets that are owned by the HWB and partner organisations; • enable the Board to be confident that commissioning plans 				

of members build from the Joint Strategic Needs Assessment (JSNA) and are aligned with the JHWBS – specifically so that the Board can sign off the alignment of commissioning plans of the CCGs and the Council;

- provide a streamlined mechanism for the Board to monitor progress against the strategy throughout its lifetime by retaining a focus on the “whole system”.

If the framework acts as a distraction or complicates systems and processes already in place, then it will have failed.

Scope of the Outcomes Framework

The scope of the outcomes framework will be clearly defined. It will focus in on a relatively small number of interventions that will make the biggest difference to the priorities. (shown in the strategy diagram as outcomes). They will be clearly defined by SMART targets.

The outcomes framework will not include all the activities of all of the partners. It is assumed that all partners will be doing other work that will contribute towards the Strategy’s overall vision, with interventions that are designed to meet the specific issues faced in their particular locality or target population. The rationale behind this approach is that this “business as usual” work is not controlled or managed by the Board. Appendix 1 includes a diagram demonstrating the relationship between the outcomes framework and partners’ commissioning plans.

Task and Finish Group

Following initial discussions with Executive Group members, it is proposed that a Task and Finish Group is brought together to design the outcomes framework and assurance process. It is suggested that these group members will, in the main, be officers from partner organisations with a responsibility for commissioning and/or performance management at a strategic level. Following an initial meeting, it is expected that most design work would then take place electronically with the minimum of face-to-face follow up sessions.

Consultation and Engagement

As with the previous stages of this strategy’s development, consultation and engagement should be integral to the activity in this stage. Workshops held at the Stakeholder Conference on 18 July 2012 started to consider the most effective interventions and will provide a good starting point for these elements of the outcome framework. The other consultation approaches that were held during stage 2 also provided information that will feed into the initial considerations for the Task and Finish Group (and these views were captured in the Consultation and Engagement Report).

3 approaches to the consultation and engagement activity are proposed:

- i. To continue the dialogue with the **public**, specifically with:
 - a) health and social care patients and service users;
 - b) Lesbian, gay and bisexual people;
 - c) BME communities;
 - d) People undergoing gender reassignment;
 - e) Faith and religious groups and communities.

The enquiry with these groups will be to seek their feedback on the most important health and wellbeing issues that they face and, given the priorities of the JHWBS, what should be the most effective interventions/approaches that can be adopted. It is suggested that HealthWatch are asked to assist with this consultation.

This approach will also fulfil the recommendation from the Equalities Impact Assessment for the strategy, which identified that the views of groups b-e above required further consultation activity.

- ii. There is a need to facilitate or host opening conversations between **commissioners and the key providers** (particularly health and social care providers and voluntary sector provider organisations) so that they are:
 - informed of the strategy's priorities;
 - understand the Board's whole systems approach;
 - can have an input to the commissioning cycle;
 - able to consider at an early stage, how to shape their products and services in line with the strategy.

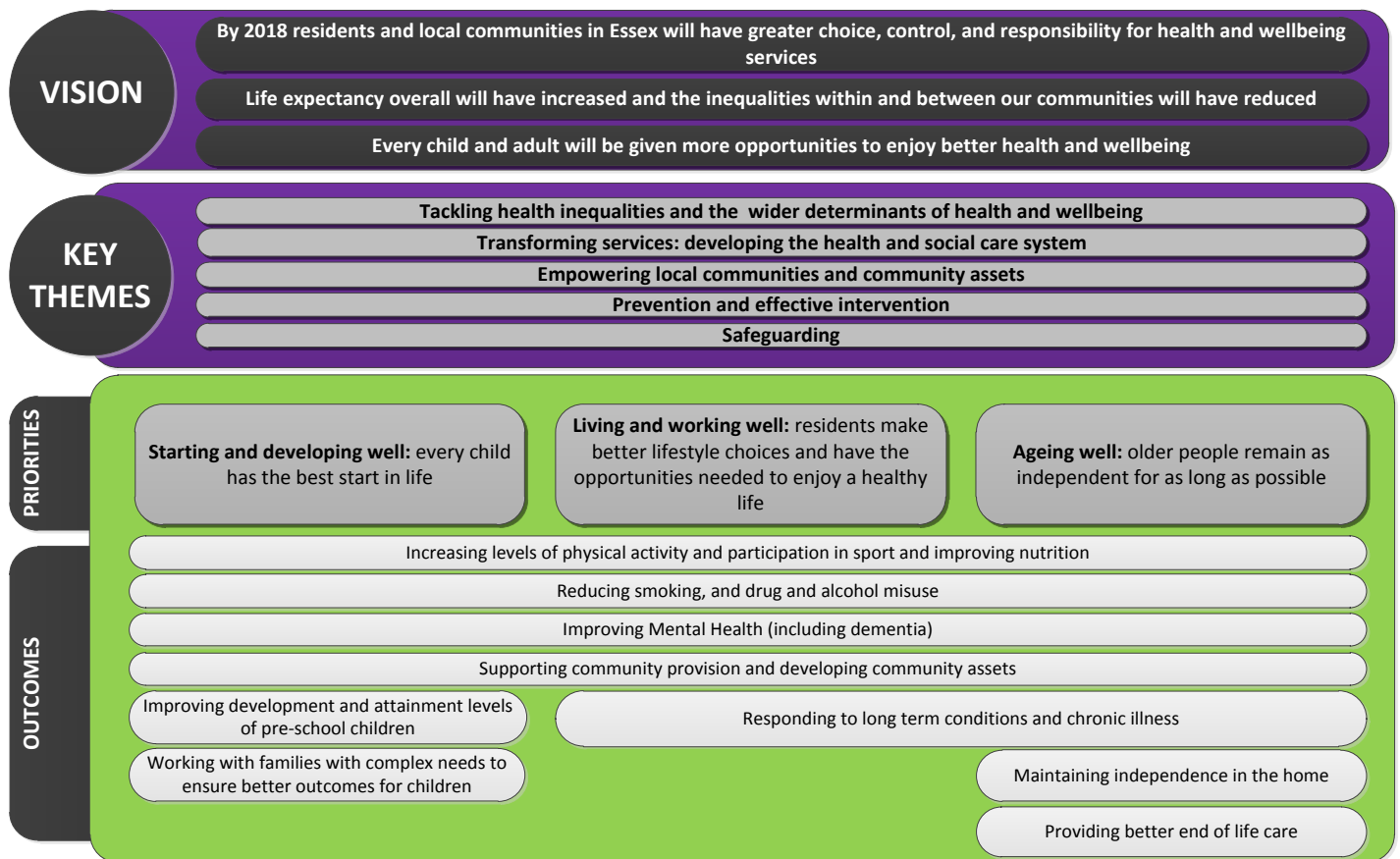
- iii. Further engagement is proposed with the **young people** that were consulted in stage 2, in order to demonstrate that the views of young people did play a strong part in deciding the priorities and to hear their views as to how best to deliver the interventions that will most affect them as residents in the county.

(Note that there is separate work taking place to consider how best to engage with and involve young people around all aspects of the HWB activity).

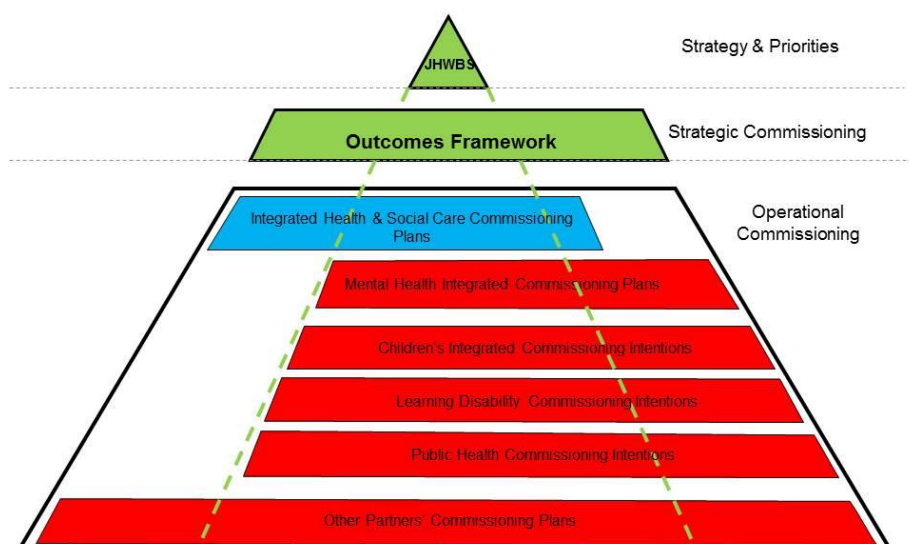
It is possible that some, all, or none of these approaches could be followed up at the next HWB Stakeholder Conference that is scheduled for February 2013.

	<p>Outputs and Timescales</p> <p>It is suggested that the outputs included in Appendix 2 of this report will meet the requirements of this stage of the strategy.</p>
Conclusions	<p>The proposals in this paper are consistent with the development of the strategy to date and have been aligned with the discussions that have taken place at the Board's Development Day held in October 2012.</p> <p>In considering these proposals, members may wish to focus their discussion on:</p> <ul style="list-style-type: none"> • The overall design of an outcomes framework and assurance process; • The approach being suggested for consultation and engagement during this stage of the strategy; • The membership of the Task and Finish Group; • The outputs and their associated deadlines for the Task and Finish Group.

Appendix 1: Diagrammatic Version of JHWBS



Relationship between Outcomes Framework and Commissioning Plans:



Note: Commissioning plans shown above are illustrative and subject to final confirmation.

Appendix 2:

Proposed Outputs for Task and Finish Group:

Proposed Output		Deadline
1.	Outcomes Framework <ul style="list-style-type: none"> SMART targets for each of the Strategy's priorities and key interventions/outcomes Identification of indicators to be used in monitoring progress (ideally) all measures to be drawn from national outcomes frameworks/metrics already collected 	Early December 2012
2.	Commissioning Plan Self-Assessment Template Template for completion by Commissioners to provide assurance of alignment with: <ul style="list-style-type: none"> JSNA JHWBS/Outcomes Framework Strategy's Cross Cutting Themes 	Early December 2012
3.	Analysis of Commissioning Plans Single document containing: <ul style="list-style-type: none"> overview of each Commissioning Plan and assessment of their alignment with the JHWBS assessment of level of progress expected to be made on the strategy as a whole Recommendations for future commissioning requirements 	For consideration at January 2013 HWB meeting
4.	HWB Monitoring Develop approach for ensuring progress against the JHWBS, options to be explored: <ul style="list-style-type: none"> Traffic light/monitoring "by exception" approach Inclusion of small no. of key progress indicators (building on existing data) Local meeting to discuss overall progress of commissioning plans Mechanism for making connections to scrutiny activities 	For sign off at February 2012 HWB meeting
5.	Whole Systems Resource Guidance for the HWB secretariat and members to ensure HWB takes a whole systems/strategic approach to issues eg: <ul style="list-style-type: none"> reviews of strategy's Cross Cutting Themes topical issues (eg. dementia, mental health) 	For use from April 2013 onwards
6.	Outline for Year 1 Review of JHWBS <ul style="list-style-type: none"> Learning points from process to date Proposals for how 1st year review of strategy will be conducted 	April 2013

Note: All of these outputs would have to tie in with proposals for the development of the HWB's key planning documents including:

- Forward Plan
- Communications Strategy.