

	Health and Wellbeing Board 17th March 2022
Title	Highlights of achievements of the Health and Wellbeing Board over the last four years and a way forward
Report of	Director of Public Health
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	Appendix I – Health and Wellbeing Board Achievements
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Summary	
<p>This report provides a high-level summary of the main achievements delivered under Barnet’s Health and Wellbeing Board since new leadership was established in 2018, including improvements in residents’ health and wellbeing outcomes and a response to the pandemic and propose way into the future role and leadership of the Board, considering the wider health and care reform and local health and wellbeing challenges faced by Barnet residents.</p>	

Recommendations
1. That the Health and Wellbeing Board notes and celebrates achievements over the past four years.
2. That the Health and Wellbeing Board discuss proposals for the way forward and put forward recommendations to the Full Council in the second half of 2022/23.

1. WHY THIS REPORT IS NEEDED

Background

1.1 Over the last four years, the Board has overseen implementation of the Health and Wellbeing Strategy 2015 – 2020 with a range of interventions that supported three main priorities agreed in 2018:

- Mental Health and Wellbeing across the life course
- Healthy Weight
- Health and Care Integration

Highlights of the main achievements are presented in Appendix I. During this period, some of the population health outcomes have improved such as a significant reduction in people completing suicides, slow and steady decrease in childhood obesity, reduction in people smoking and increase in the overall physical activity of the borough.

1.2 The Board has also overseen delivery of the pandemic during the last 18 months and Barnet has been seen as the place of best practice for the UK when dealing with COVID-19 outbreaks in care settings and places of worship, our approach to community testing and fantastic achievements in the overall COVID-19 vaccination rates as well as our hyperlocal approach to reducing inequalities in COVID-19 outcomes and vaccination. The Council distributed 87,000 Lateral Flow Device test kits within communities at higher risk (in addition to the distribution across the whole borough) and over 3,000 COVID-19 vaccines have been given at pop-ups and vaccine bus in areas with most needs. As of now, NHS has led one of the most successful vaccination programmes locally with over 267,000 people vaccinated with a first dose, 250,000 with a second dose and 190,000 people receiving booster in Barnet. All the way throughout the pandemic response, residents have been engaged in a two-way communication: two extraordinary Health and Wellbeing Boards were held with schools and faith communities in 2020 and regular communication with residents have been delivered via the excellent COVID-19 champions' network. Barnet most recent residents' perception survey conducted during the pandemic suggested an increase in trust with the Council for all matters related to health and wellbeing.

1.3 Responding to the pandemic has been a challenging yet rewarding steep learning curve, but the Board has not taken its eye off the strategic and longer-term wider impacts of the COVID-19 pandemic, recovery, and wider public health issues. As COVID-19 pandemic shone a light on disparities in health, it was even more important to capitalise on this by developing longer-term strategies that continue to energise local partnerships and the Council to embed the prevention and population health approach in all we do. The Board has approved new the [Joint Health and Wellbeing Strategy 2021-2025](#) and the Suicide Prevention Plan in July 2021 and revamped the [Joint Strategic Needs Assessment](#) in September 2021. The Board will be asked on 17th March 2022 to endorse the Prevention

Framework – with a whole-Council approach to embedding prevention, supported by an investment of £500k from Public Health Grant reserves. The Prevention theme runs through recently published [Barnet Plan 2021-25](#). The approach of the Board has been one of a true collaboration, transformational thinking and the whole system delivery at place supported by community engagement and reducing health inequalities approach.

- 1.5 As the Board emerges from the pandemic and considering the publication of [White Paper: Integration and Innovation: working together to improve health and social care for all](#) in February 2021 and the February 2022 integration white paper, [Joining up care for people, places and populations \(publishing.service.gov.uk\)](#) as well as the imminent completion of the passage through parliament of the Health and Care Bill 2022, it was important to take stock, reflect on achievements and challenges and discuss a way forward for the Board in the changing landscape. An informal workshop including the Health and Wellbeing Board members and North Central London CCG colleagues was held in February 2022 to discuss some options on the future membership of the Board and its operational delivery, how does the Board relate to newly established Barnet Borough Partnership (non-statutory collaboration between local NHS partners, Barnet Council, Healthwatch and voluntary and community sector aimed at improving overall health and wellbeing outcomes of Barnet residents by working in a more integrated way) and other emerging governance structures in the North Central London Integrated Care System (NCL ICS) that will become statutory from 1st July 2022. Whilst borough partnerships are not referenced in the primary legislation, the February 2022 white paper is clear that working at the level of place (usually co-terminus with local authority boundaries) will be a key part of all ICS, with ‘place’ seen as the key delivery level in the ICS guidance. This white paper sets out the intention that in each ‘place’ there will be a single accountable person responsible for integrated health & care outcomes, agreed by the NHS and local government. There will be a national outcomes framework for integrated care, with ICSs and place-based partnerships expected to deliver against this, with the discretion also to identify local outcomes. In addition, the HWB will need to reflect on its relationship with the Integrated Care Partnership (statutory body established as an equal partner to the ICP – see engagement document

<https://www.gov.uk/government/publications/integrated-care-partnership-icp-engagement-document/integrated-care-partnership-icp-engagement-document-integrated-care-system-ics-implementation>) and consider the implications of relevant guidance, such as ‘Thriving Places’, published by NHSE and the LGA.

1.6 It is proposed to discuss some of the main areas for consideration such as governance, operational delivery, and membership.

- 1.6 Below are some themes that emerged from informal meeting, for the HWB Board’s discussion:

Governance

- There are several statutory and non-statutory Partnership Boards, Committees and meetings in Barnet and well-established decision-making processes that have wide impact on the overall health and wellbeing of Barnet’s residents. It was proposed to map all the relevant Boards, Partnerships and Committees locally that consider health and wellbeing of residents to articulate their relationships with the Health and Wellbeing Board and ensure the Board brings added value to the system. Importance on the clarity of a decision-making process in relevant forums was highlighted.
- At present, one of the priorities in the Joint Health and Wellbeing Strategy is Health and Care Integration. The report of the Barnet Borough Partnership is also standing item on the HWBB agenda. It is proposed to strengthen governance arrangements between the Board and the Barnet Borough Partnership, once statutory the NCL ICS is established. Further work is underway across North Central London to scope out what would these arrangements look like, in anticipation of the Health and Care Bill publication planned for July 2022.
- It is unclear if the Bill will review statutory responsibilities of the Health and Wellbeing Board, so it is proposed to await publication of the Bill before formal proposals are put forward, for decision.
- It was proposed to undertake mapping of wider the NCL governance structures, including the NCL Population Health and Inequalities Committee to ensure there are clear links to strategy and outcomes that would benefit Barnet’s residents in most efficient and productive way.
- The recently published White Paper on health and care integration states that “NHS Bodies and Health and Care Partnerships will have formal duties to have regard to HWB plans”. It will therefore be crucial to articulate and strengthen HWB Board role as a conduit between the Borough Partnership and NCL ICS, once further guidelines are published.

Operational delivery

- Before the pandemic, we took the Board closer to communities and had dialogues on various matters important to the communities, that were then incorporated into some interventions. It is proposed to re-start doing this from July 2022 to promote a role of the Health and Wellbeing Board as place-based leader and a ‘planner’ (as the White Paper states) of the Health and Wellbeing Strategy and it’s implementation.
- It is proposed to visit different areas each time and invite residents, communities and local organisations to have a ‘spotlight’ on the agenda, engaging with board members about work that is happening, their views and

suggestions; showcasing innovation, success and good practice. This place-based approach could focus on areas where health and care needs are greatest or/and where we have excellent examples of evidence-based preventative approaches that improve outcomes of local residents. It is proposed to pilot this approach for two meetings and then develop a forward programme taking into account what worked well with the initial two meetings.

- The Board will also need to agree the way in which specific actions based on this engagement will be taken forward either within the Health and Wellbeing Strategy action plan or through other mechanisms.

HWB Board membership

- To review membership in light of the North Central London Integrated Care System (NCL ICS) being established on 1st July 2022 and to give consideration to inclusion of up to three local clinical leads (General Practitioners) who are representatives of local Primary Care Networks (PCNs) in Barnet or/and GPs who will have NCL clinical leads roles. The PCNs will be a cornerstone in future neighbourhood / place-based work so strengthen representation on the Board will enhance our local work.
- To agree Vice-Chair of the Board which could be NCL Chief Medical Officer or their deputy;
- To retain core membership (with changes described above), as it is now, and have extended membership to include NHS local providers representatives, Mental Health Trust representatives, Police, Fire, Middlesex University, as and when relevant themes are discussed at the Board. It will be important not to duplicate conversations with relevant stakeholders that may take place at other Partnership Boards locally.

2 REASONS FOR RECOMMENDATIONS

- 2.1 Barnet Health and Wellbeing Board has a crucial partnership role at place that brings together local democracy, experts in the health and care system and grounded community engagement. By strengthening the Board's membership to include major local players in the wider health and care system that reflect statutory NCL Integrated Care System post 1st July and agreeing more focused place-based approach already tried and tested would result in improving health and wellbeing outcomes for Barnet's residents, with faster improvements in areas where needs are highest.

3 ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 Not applicable.

4 POST-DECISION IMPLEMENTATION

- 4.1 Following the agreement and feedback of HWB Board, agreed way forward would be taken to the Full Council, once statutory NCL Integrated Care System is established. This is likely to be between July and September 2022.

5 IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 The purpose of the Health and Wellbeing Board is to improve the health and wellbeing of the local community and reduce inequalities for all ages. Priorities are articulated in the Strategy link to the current Corporate Plan and Prevention Framework.

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.3 The Joint Health and Wellbeing Strategy 2021-25 is delivered within existing resources (including Public Health Grant) and additional investment into the whole system prevention was agreed by the lead Chief Officer, Director of Public Health and Prevention and the Council Management Team.

5.4 Social Value

- 5.4.1 The Public Services (Social Value) Act 2013 requires those who commission public services to think about how they can also secure wider social, economic and environmental benefits. A whole systems approach to prevention considers the ways that their service areas can promote healthier communities, contributing to each of these wider benefits.

5.5 Legal and Constitutional References

- 5.5.1 Article 7 Committees, Forums, Working Groups and Partnerships of the Council's Constitution sets out the terms of reference of the Health and Wellbeing Board which includes:

- To jointly assess the health and social care needs of the population with NHS commissioners, and apply the findings of a Barnet Joint Strategic Needs Assessment (JSNA) to all relevant strategies and policies.
- To promote partnership and, as appropriate, integration, across all necessary areas, including the use of joined-up commissioning plans across the NHS, social care and public health. To explore partnership work across North Central London where appropriate
- To work together to ensure the best fit between available resources to meet the health and social care needs of the population of Barnet (including children), by both improving services for health and social care and helping people to move as close as possible to a state of complete physical, mental and social wellbeing.
- Specific responsibilities for overseeing public health and developing further health and social care integration

- 5.5.2 Membership of the Board includes: Chairman, an elected member appointed by Council and Vice Chairman as Chair of Barnet CCG Governing Body, three Members of the Council, Director of Public Health and Prevention, Executive Director for Children and Family Services, Executive Director for Adults and

Health, Barnet Clinical Commissioning Group Board three members (general practitioners), Barnet Clinical Commissioning Group- Chief Officer, Barnet Healthwatch representative, Barnet voluntary and community sector representative and Independent Chair of the Adults Safeguarding Board (Non-Voting Member). Requirement for proportionality is waived and voting rights allowed to members other than Members of the Council. The Quorum should consist of at least one Councillor and one health representative.

5.6 Risk Management

5.6.1 None identified.

5.7 Equalities and Diversity

A whole systems approach to prevention and health and care integration focus on health inequalities which persist amongst groups with protected characteristics. Consultations that took place and ongoing engagement with appropriate stakeholders champions are informing the whole systems approach to prevention and are aimed at preventing unintended harms against marginalised groups and promote health equity.

5.8 Corporate Parenting

5.8.1 Whilst there is no direct impact on the council's corporate parenting role as a result of the HWB Board's changes, the overall HWB Strategy developments and actions do provide opportunities to support the council's role as corporate parent through the health and wellbeing improvement interventions for children and young people residing in the borough including children in care.

5.9 Consultation and Engagement

5.9.1 Consultation and engagement activities have been a crucial part of developing Health and Wellbeing Strategy 2021-25 and the pandemic response. It is envisaged to transit COVID-19 Champions into more general health and wellbeing champions to support ongoing delivery of the Joint Health and Wellbeing Strategies. Plans have been agreed with Groundworks and transition has commenced.

5.10 Insight

5.9.1 The data in this report was gathered from former Public Health England's national data sources and publications, latest Public Health Outcomes Framework data and updated Joint Strategic Needs Assessment.

6 BACKGROUND PAPERS

6.1 Barnet's Health and Wellbeing Strategy

[Barnet Joint Health and Wellbeing Strategy 2021 to 2025 - full document.pdf](#)

6.2 Barnet's Joint Strategic Needs Assessment

[Joint Strategic Needs Assessment – Barnet Open Data](#)

6.3 Public Health England fingertips

<https://fingertips.phe.org.uk/>