
Meeting	Health and Well-Being Board
Date	27 June 2013
Subject	Performance Management Framework for Health and Well-Being Strategy
Report of	Director for People
Summary of item and decision being sought	This report updates previous proposals for a performance management framework which would allow the Health and Well-Being Board the opportunity to monitor performance regularly against a number of key objectives set out in the Health and Well-Being Strategy.

Officer Contributors	Claire Mundle, Commissioning and Policy Advisor- Public Health / Health and Well-Being
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Reason for Report	To meet the requirements of the Health and Well-Being Board's Terms of reference 'To agree a Health and Well-Being Strategy for Barnet taking into account the findings of the Joint Strategic Needs Assessment and performance manage its implementation to ensure that improved outcomes are being delivered'.
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Partnership flexibility being exercised	N/A
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Wards Affected	All
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RECOMMENDATIONS

- 1.1. That the Health and Well-Being Board approves the proposed approach to the development of a performance management framework for monitoring the delivery of the Health and Well-Being Strategy.
- 1.2. That the Health and Well-Being Board agrees with the proposal for the Health and Well-Being Board Performance Group to support the performance monitoring of the Health and Well-Being Strategy. The proposed performance group will be of similar standing to the Health and Well-Being Board Financial Planning Group, i.e. an officer group focused on the implementation of the Health and Well-Being Strategy and reporting progress back to the Board.
- 1.3. That the Lead Agencies represented at the Health and Well-Being Board confirm named performance contacts to sit on the Health and Well-Being Performance Group.
- 1.4. That the Health and Well-Being Board endorses the allocation of Lead Agency responsibilities in relation to the strategy set out in Appendix A.

2. RELEVANT PREVIOUS DISCUSSIONS AND WHERE HELD

- 2.1 Health and Well-Being Board 17 November 2011- item 6- Performance Management Framework for Health and Wellbeing Board.
- 2.2 Health and Well-Being Board 17 November 2011 – item 5- Developing the Health and Wellbeing Strategy

3. LINK AND IMPLICATIONS FOR STRATEGIC PARTNERSHIP-WIDE GOALS (SUSTAINABLE COMMUNITY STRATEGY; HEALTH AND WELL-BEING STRATEGY; COMMISSIONING STRATEGIES)

- 3.1 The agreed performance objectives have been set out in the Health and Well-Being Strategy (2012-15).
- 3.2 The CCG work plan has been deliberately aligned to the objectives of the Health and Well-Being Strategy.

4 NEEDS ASSESSMENT AND EQUALITIES IMPLICATIONS

- 4.1 The targets within the Health and Well-Being Strategy have been set based on the results of the Joint Strategic Needs Assessment, which considers health and social care outcomes across all of Barnet's population groups, and pays particular attention to the different health inequalities that exist in the Borough.

5. RISK MANAGEMENT

- 5.1 An effective system of performance management mitigates the risk that the Health and Well-Being Board is not actively managing performance against

key objectives, or is being inefficient in devoting resources to the measurement of non-priorities.

6. LEGAL POWERS AND IMPLICATIONS

6.1 None specifically arising from this report.

7. USE OF RESOURCES IMPLICATIONS- FINANCE, STAFFING, IT ETC

7.1 None specifically arising from this report. However where relevant financial performance or implications will also be noted.

8. COMMUNICATION AND ENGAGEMENT WITH USERS AND STAKEHOLDERS

8.1 Healthwatch will play an important role in ensuring that the Health and Well-Being Strategy is making a difference, and in advising lead agencies on how the voices of users and carers can feed in to the performance management of the Strategy.

8.2 The Partnership Boards will be formally supported by the Health and Well-Being Board to take forward the objectives of the Strategy through the twice annually Partnership Board Summits.

9. ENGAGEMENT AND INVOLVEMENT WITH PROVIDERS

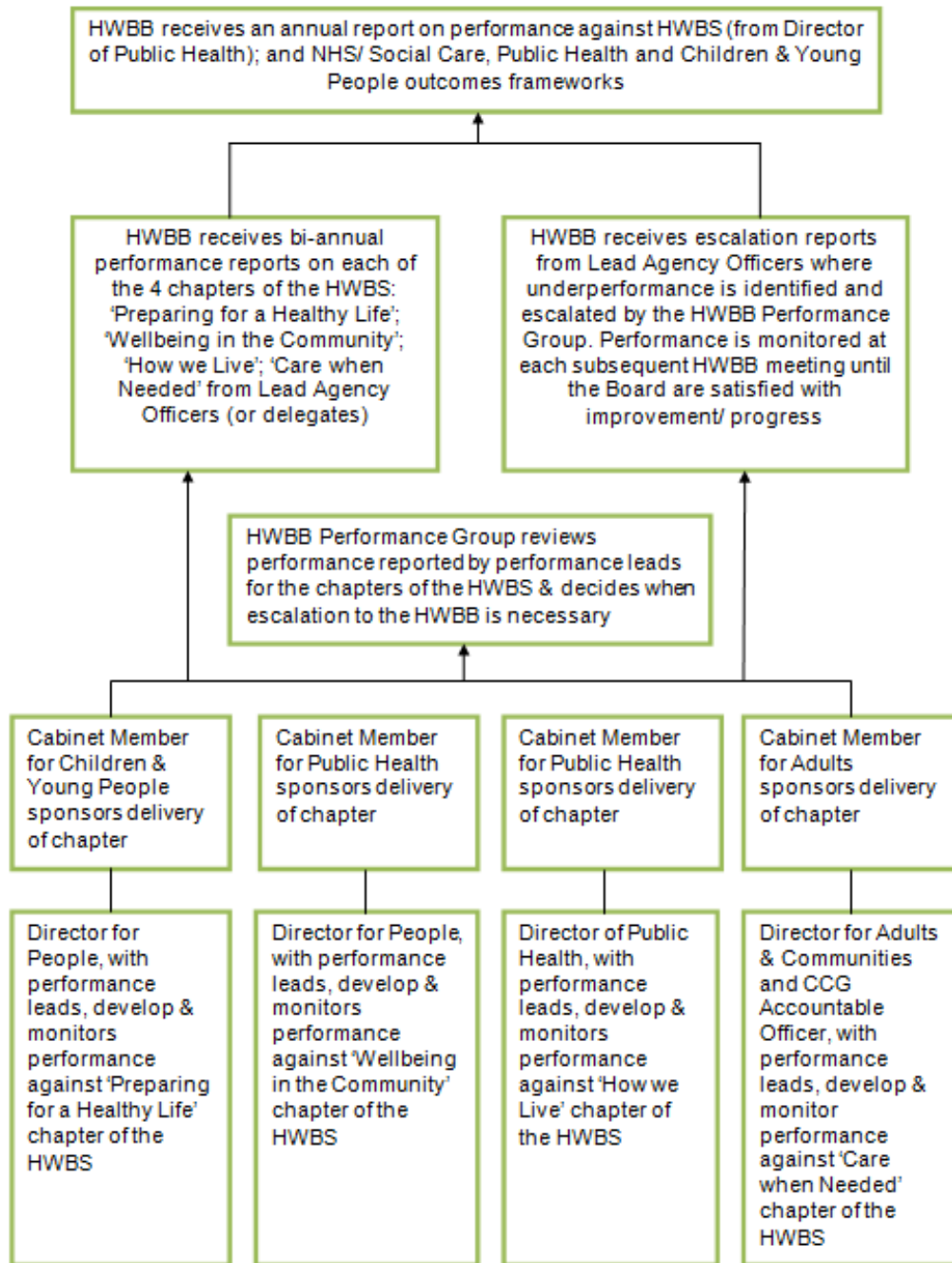
9.1 The framework has been developed in conjunction with the Public Health team.

10. DETAILS

10.1 This report focuses on the development of a performance management framework for the Health and Well-Being Strategy (HWBS). The Strategy contains a clear set of indicators, for which a number of delivery agencies- the Barnet Children's Trust, the London Borough of Barnet (LBB), Public Health Barnet, Barnet Clinical Commissioning Group (CCG) and Barnet Adult Social Care Services- are named responsible leads for performance.

10.2 A robust approach to performance management to support the HWBS has not yet been agreed. There is an immediate need to develop a performance framework against which delivery of the HWBS can be judged.

10.3 The proposed approach to monitoring performance is set out below:



- 10.4 It is suggested that this process is monitored through the presentation of bi-annual performance reports at Health and Well-Being Board (HWBB) meetings for each of the 4 chapters of the HWBS- *Preparing for a Healthy Life; Wellbeing in the Community; How we Live; and Care when Needed*. It is proposed that these presentations will take place in May and November of each calendar year.
- 10.5 At the November 2012 Health and Well-Being Board meeting, these reports will be fronted by an (annual) assessment of overall performance against the Strategy, compiled by the Director of Public Health and the Commissioning and Policy Officer for Public Health / Health and Well-Being. This comprehensive review of performance will be used to:

- Inform the commissioning intentions of the Public Health team and the CCG for the following year (giving the report a strong strategic purpose; complementing the commissioning cycle)
 - Review the Health and Well-Being Strategy and ensure that it continues to be fit for purpose
- 10.6 The full (annual) performance report should be published as a stand-alone document that the general public and other interested parties can access easily. The report should also be presented at the Barnet Partnership Board, to which the Health and Well-Being Board is accountable.
- 10.7 Each of the four chapters of the Strategy will be endorsed by the appropriate Cabinet Member. The Cabinet Member will work in partnership with the relevant Lead Agency Officer to oversee performance against their chapter of the Strategy.

It is proposed that these arrangements are as follows:

HWBS Chapter	Cabinet Member Sponsor	Lead Agency Officer
Preparing for a Healthy Life	Cabinet Member for Children & Young People	LBB Director for People
Wellbeing in the Community	Cabinet Member for Public Health	LBB Director for People
How we Live	Cabinet Member for Public Health	Director of Public Health
Care when Needed	Cabinet Member for Adults	CCG Accountable Officer; LBB Adults & Communities Director

- 10.8 The progress reports will be prepared and presented by the Lead Agency Officer (or a delegated lead) with additional service delivery leads invited along to comment on progress where this is appropriate. The reports will follow a standardised performance reporting template, which will be developed by the Commissioning and Policy Officer for Public Health / Health and Well-Being.
- 10.9 In order to be able to provide these progress updates, each Lead Agency Officer will be expected to track their teams' progress against the Strategy on an on-going basis. It is recommended that each Lead Agency Officer is supported by the Commissioning and Policy Officer for Public Health / Health and Well-Being to develop the performance monitoring framework that will support their chapter of the Strategy. There will be a workshop set up with Lead Agency Officers and relevant members of their teams to establish the frameworks.

- 10.10 It is proposed by this paper that following the workshop, the Lead Agency Officers are supported to monitor progress with the support of a Health and Well-Being Board Performance Group. The proposed performance group will be of similar standing to the Health and Well-Being Board Financial Planning Group, i.e. an officer group focused on the implementation of the Health and Well-Being Strategy and reporting progress back to the Board.
- 10.11 The performance frameworks should be designed and completed by September 2013, to allow time for the Director of Public Health and the Policy and Commissioning Officer to review the progress that has been made and produce an overall assessment of performance that will be brought to the November 2013 meeting. It is suggested that the performance monitoring frameworks are audited at least annually to ensure they are fit for purpose. Efforts should be made by each Lead Agency Officer to identify where they are duplicating performance reporting and escalate this to the Health and Well-Being Board Performance Group so that the design of this performance framework can be finessed over time.
- 10.12 The performance leads who support each Lead Agency Officer should attend the Health and Well-Being Board Performance Group. They will present verbal updates on progress, and report any slippages in performance to the Group. The Health and Well-Being Board Performance Group will work with the Lead Agency to rectify slippages where possible. The Performance Group will support Lead Agency Officers to escalate performance issues to the Health and Well-Being Board, for the Board to review and decide on a remedial course of action. The Health and Well-Being Board will then continue to receive reports from the Lead Agency at each meeting until performance has improved to an acceptable level (to be agreed on a case-by-case basis by the Board).
- 10.13 The objectives and targets set in the HWBS have also been deliberately aligned to the priorities in the Public Health, NHS and Social Care Outcomes Frameworks (and will in future account for the Children's and Young People's Outcomes Framework). It is proposed that the relevant Lead Agencies representing Public Health, the NHS, Social Care and Children's Services, respectively, bring reports to the Health and Well-Being Board annually to report on progress against these national priorities.

11 BACKGROUND PAPERS

None

Legal - CE
CFO - AD

Appendix A: Health and Well-Being Strategy Objectives and Indicators

Preparing for a Healthy Life. Lead Agency: the Children's Trust

OBJECTIVES	RESPONSIBLE LEAD(S)	INDICATORS	DATA SOURCE(S)
Enable all women, and particularly those with complex needs such as mental ill health, to plan their pregnancies and to prepare for pregnancy in a way that maximises the health outcomes both for the child and mother	Barnet CCG; Barnet & Harrow Public Health	All women in Barnet to access NICE compliant maternity care by 12 weeks gestation Reduce the smoking in pregnancy rate from 10% to below the London average of 7.5%	Barnet CCG Director of Public Health
Increase the take up of immunisations, particularly the MMR pre-school booster	NHS England	Maintain Immunisation rates at above national and regional target rates with preschool immunisations covering at least 90% of all children of Barnet.	NHS England
Expand the Family Nurse Partnership initiative to support families who are experiencing significant challenges.	NHS England		
Expand the community budgets programme for children to provide early intervention for children from families with the most complex needs.	The Children's Trust; LBB Family Services Director	Include an additional 705 families with complex needs in the community budget programme - where there is a decrease in the number and range of interventions from statutory organisations	LBB Family Services Director
Reduce obesity in children and young people by working with schools, community groups and parents to promote healthy eating and increase the use of active and sustainable school travel plans and the range of organised physical activities available	Barnet & Harrow Public Health	Reduce the rate of obesity in reception year school children from 11% to be better than the London average. Reduce the rate of obesity in year 6 children from 17.5% baseline towards the England best of 10.7%	Director of Public Health

Embed Active Lifestyles programmes in primary and secondary schools to encourage healthy lifestyles for parents and children.	Barnet & Harrow Public Health		
Design and implement a range of interventions designed to reduce risk taking behaviour in children including Sexual Health and substance misuse that are delivered through statutory and voluntary partners.	Barnet & Harrow Public Health	Reduce the number of children and young people misusing alcohol and drugs by 91% by 2014/15.	Director of Public Health
Effectively plan for transition from children's services to adult services.	LBB Education and Skills Director; LBB Adults and Communities Director	Increase the number of young people who have a transition plan when they are 18 to 70% in the first year, and achieve 90% by 2013/14 and 100% by 2014/15.	LBB Education and Skills Director; LBB Adults and Communities Director

Wellbeing in the Community. Lead Agency: London Borough of Barnet

OBJECTIVES	RESPONSIBLE LEAD(S)	INDICATORS	DATA SOURCE(S)
Use the Council's planning and licensing processes to create a built environment that is conducive to healthy living choices such as walking and the accessibility of safe open spaces	LBB Development & Regulatory Services		
Review the opportunity to deliver wider health and well-being objectives through the Borough's regeneration schemes	LBB Enterprise & Regeneration Lead Commissioner; Barnet & Harrow	Reducing the average length of time spent by households in short-term nightly purchased accommodation to 26 weeks through the implementation of our Regeneration Strategy and a target of 25 vulnerable people moving to	LBB Housing & Environment Lead Commissioner; LBB Adults and Communities Director

	Public Health	more independent living by 2012/13, 20 people by 2013/14 and a further 25 people by 2014/15.	
Reduce social isolation, especially amongst older people, through schemes that enable the sharing of skills and experience	LBB Later Life Lead Commissioner; LBB Schools, Skills & Learning Lead Commissioner		
Maximise training and employment opportunities, through the Regeneration Strategy for those furthest from the labour market to access new job opportunities.	LBB Enterprise & Regeneration Lead Commissioner	Increase by 9% the number of people with long term mental health problems and people with a learning disability in regular paid employment for 2012/13, increasing to 10% for 2013/14 and 11% by 2014/15.	LBB Adults and Communities Director
Work with private landlords and tenants to bring private rented accommodation up to the Decent Homes Standard	LBB Housing & Environment Lead Commissioner		
Target advice and financial support to enable vulnerable and elderly residents to improve their homes in relation to thermal efficiency	LBB Housing & Environment Lead Commissioner		
Work in partnership with local employers and other statutory organisations to ensure a range of training and education opportunities and flexible working opportunities are available that will support people into work with a particular focus on young people who are not in education, employment or training and disabled adults.	LBB Enterprise & Regeneration Lead Commissioner; LBB Schools, Skills & Learning Lead Commissioner	Reduce by 4.3% the number of young people who are not in education, employment or training	LBB Family Services Director

This will be encouraged through local apprenticeships for young people and the Right to Control programme for disabled adults undertaken in partnership between the Council and Job-Centre Plus.			
Work with local community leaders, community groups and service providers to develop mutual support between citizens using people's strengths and experiences to increase inclusion into local communities, overcome language barriers and develop stronger inter-generational support.	LBB Family & Community Wellbeing Lead Commissioner; LBB Later Life Lead Commissioner	Achieve a 5% increase in the number of residents who identify that they have a greater sense of belonging to, and contributing to, the community in which they live to foster greater trust and mutual support, to meet the national average of 79% of residents	LBB Later Life Lead Commissioner (Equalities Lead)
Working across the Public Sector, in partnership with the Voluntary Sector and community groups, to ensure the availability of information and advice on a range of health and wellbeing related choices	LBB Later Life Lead Commissioner; Healthwatch Barnet		

How we live. Lead Agency: Public Health

OBJECTIVES	RESPONSIBLE LEAD(S)	INDICATORS	DATA SOURCE(S)
Discourage uptake of smoking in children by working with partners in education and community groups and to increase the range of people within the public and private sector trained to provide smoking cessation advice.	Barnet & Harrow Public Health		
Encourage and enable smokers to quit, and people who are overweight and obese to lose weight	Barnet & Harrow Public Health	Reduction of 20% in the number of people smoking in Barnet by 2016 in line with the London target.	Director of Public Health

Promote healthy eating through working with local food suppliers, restaurants, public houses, places of entertainment and similar commercial enterprises to help to increase the availability of, and choice for healthy foods and drinks	Barnet & Harrow Public Health; LBB Development & Regulatory Services		
Increase both the offer and take-up of health and lifestyle checks in primary care to all people aged between 40 and 74 years to help reduce risk factors associated with long term conditions	Barnet & Harrow Public Health; Barnet CCG	Year on year increase based on the 2009/10 baseline of people aged between 40 and 74 who have received an NHS Health Check. In five years our coverage should be 80% Year on year increase based on the 2009/10 baseline of people with a learning disability and those with a mental illness who have received an annual health check.	Director of Public Health Barnet CCG
Make better use of the range of green spaces and leisure facilities in the Borough to increase levels of physical activity. This is being supported by the Council undertaking a Strategic Review of Leisure Opportunities to explore the ways in which residents use their leisure time and the role of the Council's services (parks, green spaces, leisure centres, community centres etc) in promoting health and well-being	Barnet & Harrow Public Health; LBB Street Scene; LBB Director for People	3% increase in the number of adults participating in regular physical activity by 2015.	Director of Public Health
Continue Trading Standards under-age alcohol sales test purchasing programme together with enforcement of Licensed premises licence conditions in relation to sales of alcohol to people who are already drunk.	LBB Development & Regulatory Services		

		Increase breast screening uptake and improve coverage to exceed the target of 70% by 2015	NHS England
		Increase uptake of bowel cancer screening to meet national indicator of 60% by 2015	NHS England
		Rates of increasing and higher risk drinking are reduced from 17.7% of the population aged 16+ towards the best performance in England of 11.5%	Director of Public Health

Care when needed. Lead Agency: Adult Social Care & Barnet CCG

OBJECTIVE	RESPONSIBLE LEAD(S)	INDICATORS	DATA SOURCE(S)
Develop neighbourhood and community based support networks for older people providing information, and support on range of leisure, health, housing and support issues in the Borough.	LBB Adults and Communities Director; Later Life Lead Commissioner		
Early identification and actions to reduce the impact of disease and disability	LBB Adults and Communities Director; Barnet CCG	The balance of spend on older people in both the NHS and Social Care has been realigned to provide a greater focus on prevention.	Health & Wellbeing Board Financial Planning Group
Develop and implement a comprehensive frail elderly pathway that spans Health and Social Care, moving from prevention through multiple episodes of illness to end of life care	LBB Adult Social Services; Barnet CCG	The percentage of frail elderly people who are admitted to hospital three or more times in a 12 month period is reduced from 2009/10 baseline.	LBB Adults and Communities Director; Barnet CCG
Extensively roll out tele-health and tele-care solutions to provide a cost effective way of supporting more people in their own homes.	LBB Adults and Communities Director; Barnet		

	CCG		
Implement integrated personalised support arrangements for people with social care and health needs through the provision of personal budgets covering both health and social care.	LBB Adults and Communities Director	That all people who have continuing healthcare needs are able to have a personal health budget by 1st April 2014	Barnet CCG
Develop the offer for supporting Barnet residents in care homes including continence management, wound care, medicine reviews and assessments to improve quality of care and dignity of residents and reduce admissions to hospitals.	LBB Adults and Communities Director; Barnet CCG	The number of emergency admissions related to hip fracture in people aged 65 and over is reduced by 10% from the 2009/10 baseline of 457.3 by 2015.	Barnet CCG
Continue the implementation of the existing multi-agency Barnet Carers Strategy with a specific focus on increasing the number of carers with an agreed Carers contingency plan and the provision of carers' breaks.	LBB Adults and Communities Director; Carers Strategy Group	An increase of 20% by 2015 in the number of carers who self-report that they are supported to sustain their caring role from the 2011/12 baseline	LBB Adults and Communities Director
Ensure that local residents are able to plan for their final days and to die at home if they would prefer. Work will need to be undertaken to build the skills and capacity in the community to provide support for those dying and those family members who care for them.	Barnet CCG	Increase in the number of people who are receiving end of life care that are supported to die outside of hospital	Barnet CCG; LBB Adults and Communities Director
		Increase the percentage of people aged 65+ who are still at home 91 days after discharge into rehabilitation services to 87% in 2013 with a stretch target to reach 90% by 2015.	LBB Adults and Communities Director; Barnet CCG

Appendix B: Proposed officer membership for the Health and Well-Being Board Performance Group

- Commissioning and Policy Officer- Public Health / Health and Well-Being, LBB
- Performance lead: Barnet and Harrow Public Health team
- Performance lead: Barnet CCG
- Performance lead: Adults and Communities
- Performance lead: The Children's Trust
- Joint Commissioner: Older People
- Joint Commissioner: Mental Health and Learning Disabilities
- Joint Commissioner: Children's Services