

Report of the Strategic Director of Health and Wellbeing to the meeting of Bradford and Airedale Health and Wellbeing Board to be held on Tuesday 13th November

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Subject:

Chair's Highlight report:

Health and social care partnership update – One Workforce
Joint Health Wellbeing Strategy (JHWS) logic models
Bradford District Plan annual progress report
Sub group updates – ECB and ICB

Summary statement:

The Health and Wellbeing Board Chair's highlight report summaries business conducted between Board meetings. November's report includes an update on the Health and Social Care Partnership with a focus on the One Workforce programme, a request to sign off the logic models approach, to sign off the District Plan Annual progress report and updates from the Board's sub- groups.

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Portfolio:

Healthy people and places

Overview & Scrutiny Area:

Health and Social Care

1. SUMMARY

The Health and Wellbeing Board Chair's highlight report summaries business conducted between Board meetings. November's report includes an update on the Health and Social Care Partnership with a focus on the One Workforce programme, a request to sign off the logic models approach, to sign off the District Plan Annual progress report and updates from the Board's sub-groups.

2. BACKGROUND

As the report covers multiple items, the background to each item appears together with the update in Section 3 below.

3. OTHER CONSIDERATIONS

3.1 Health and social care partnership – One Workforce update

3.1.1 An Invitation to Tender/specification will be advertised the beginning of November for a consulting group to:

1. Establish a formal Health and Social Care Economic Partnership Board with agreed scope, structural and governance arrangements as well as the identification of plans and deliverables in the broader region in order that Bradford's uniqueness in this sector can be recognised and celebrated
2. Develop the One Workforce Academy involving key stakeholders and partners to set out the case for change, identifying critical success factors as well as constraints to the successful development of the Academy.

3.1.2 Summary and Timeline:

- The successful consulting group will be identified in December
- In the New Year their work will commence and will cover an 18 month period of time
- Also in the New Year, Skills House will be beginning to establish their professional presence on the Health and Social Care landscape through training and recruitment working across the District with Partners, Stakeholders, other employers and unemployed people/candidates
- Recruitment of staff to support the One Workforce Programme Director (currently interim) will begin in December so people are in post by the spring.
- Consultancy work will produce communication and engagement plan(s) with the expectation that we will have a One Workforce Launch in 2019.
- Given the amount of work to establish a fit for purpose Academy (scope, negotiation, curriculum design, partner resource implications and demand on the Academy), it is expected to be mid 2020 before the One Workforce Academy is formally open for business.

3.2 Joint Health Wellbeing Strategic logic models

3.2.1 Our Joint Health and Wellbeing Strategy sets out our ambition for a happy and healthy Bradford District. We will know that we are making progress towards that

ambition by people living longer, more people living more years in good health, and a reduction in the gap in life expectancy between our most and least deprived areas. It, however, takes time to see changes in such overarching measures of our health and wellbeing, and so we need different measures in the short term.

3.2.2 A logic model has been developed taking us from our strategies and plans, and the actions that we will take as part of these, to the output measures that tell us whether we did what we said we would, and the outcomes measures that tell us if what we did has made a difference. The logic model approach was supported by the Health and Wellbeing Board (HWB) in September 2018.

3.2.3 There were some asks from the HWBB at this time. Firstly assurance that the measures in the logic model are aligned with other high level plans and strategies; this has been done through consultation with partners over the last 2 months. Secondly, there was a request that where available, data on inequalities is presented for relevant outcome measures; this has been incorporated into the annual outcome report. Thirdly, given the breadth of the strategy and the corresponding large number of indicators outlined in the logic model, there was an ask that the indicators be refined to focus on those that matter the most; again this has been done in partnership with the relevant people.

3.2.4 The final logic model is attached (See Appendix 1). An annual outcomes report is in development – this will provide an update on the outcomes that we said we wanted to achieve in our strategy, and will be prepared on an annual basis for the HWBB. A performance framework is also in development; this will be available to the HWBB on a quarterly basis, and will report on a number of process measures, giving the HWBB assurance that actions and plans are being implemented successfully. (See Appendix 2)

3.3 Bradford District Plan annual progress report

3.3.1 The Bradford District Partnership (BDP) brings representatives of the public, private, voluntary and community sectors together to work to improve the quality of life for all who live in, work in and visit Bradford District. The BDP acts as the strategic body (family of partnerships) which enables partners to come together to focus on current issues and future challenges, and to coordinate, facilitate and challenge delivery.

3.3.2 The BDP’s main purpose is to harness the collective resources of the district to drive delivery of the outcomes outlined within the District Plan 2016-20. The District Plan sets out the district’s vision and priorities for action. It also provides a performance framework for accountability, while at the same time highlighting the coordinated effort needed across organisations to deliver our shared outcomes.

3.3.3 Individual BDP partnerships have taken lead responsibility for each of the outcomes and report back to each relevant Overview and Scrutiny Committee on a regular basis. The BDP outcomes covered by each of the Partnerships are as follows:

District Plan Outcome	Responsible BDP Partnership
Better skills, more good jobs and a growing economy	Bradford Economic Partnership

A great start and good schools for all our children	Children's Trust
Better health, better lives	Health and Wellbeing Board
Safe, clean and active communities	Shared between the Community Safety Partnership, and the Integration/Safer Communities Partnership
Decent homes that people can afford to live in	Bradford Economic Partnership

- 3.3.4 The annual report presented in this report (See appendix 3) focuses on the overall achievements from 2017/18 and future challenges for district partners, presented outcome by outcome.
- 3.3.5 Performance is monitored on a regular basis throughout the year through the District Plan performance management framework, details of which are updated on a regular basis on the [BDP web site](#).
- 3.3.6 Following updated BDP governance arrangements at the beginning of 2018, the Health and Wellbeing Board is now the lead Partnership within the BDP family, and therefore as well as having responsibility for delivery of the Better Health Better Lives outcome, has overall responsibility for overseeing the delivery of the District Plan.
- 3.3.7 The annual report reflects on progress for the 12 months up to the end of March 2018, with a narrative providing full analysis of progress and any on going challenges. The annual report gives some insight into the drivers behind poor and positive performance against the District Plan success measures. However live performance data and intelligence, on the District Plan measures amongst others, is available by clicking through the links on the District Dashboard (available on the Bradford District Partnership web site). At any time this will provide the most recent data and information available to the Council.
- 3.3.8 Progress report 2017/18 – key highlights
The full progress report for 2017/18 is presented at appendix 3. For each outcome this presents:
- A reminder of the ambition from the District Plan
 - Progress on success measures with status and trajectory to the 2020 target
 - Analysis and commentary on the progress
 - More detailed case study of successful projects
- 3.3.9 Some highlights from the report are presented below, outlining progress made for each outcome.
- 3.3.10 Better skills, more good jobs and a growing economy

- a) Productivity in Bradford was the highest of any city in the north as measured by GVA per worker.
- b) Bradford has been chosen to be a lead city in developing an innovative approach in using drones to help address challenges around such issues as environmental management, disaster response, and helping to position the district as a test-bed for further innovation.
- c) The Economic Strategy was launched to both a Bradford and a London audience.
- d) The Economic Partnerships has successfully lobbied along with other organisations for Bradford to have a rail stop on the new direct Northern Powerhouse route between Manchester and Leeds.
- e) The City Centre Growth Scheme continues to support new business to move into the City Centre and existing businesses to grow. The last 12 months saw 11 businesses being awarded Business Rate Rebates in recognition of their job creation.
- f) Bradford was named by Barclays as the best place to start a business in the UK.
- g) Get Bradford Working (GBW) supported its 3,000th person into work, and is featured on the Local Government Association website as a case study of local employment and skills programmes.
- h) Bingley Music Live was a resounding success in it's 11th Year.

3.3.11 Great start and good schools for all our children

- a) Bradford was awarded Opportunity Area (OA) funding receiving £11 million over 3 years to promote social mobility through a partnership approach to education. Teacher recruitment and retention is identified as a priority in the OA. Since then the Council has run a series of bus tours taking trainees into schools leading to more than 200 talented teachers choosing to start their career in Bradford over the last two years.
- b) The Innovation Bid has been implemented for B Positive Pathways; this focuses on keeping teenagers out of care.
- c) Bradford has created more than 9000 additional primary school places since 2010 after successfully securing Government funding
- d) The Advance Manufacturing and Engineering ICE (a partnership with employers) was a finalist for the prestigious national TES Employer Engagement Award. They have recruited 2,974 young people to date, exceeding its target of 1500.
- e) The Education Covenant grew significantly with 20 Community Champions signed up

3.3.12 Better health, better lives

- a) Bradford Beating Diabetes (BBD): This programme has focussed its attention on supporting people who are at high risk of developing Type 2 diabetes to delay or prevent the onset of the disease and is supported by Bradford becoming a demonstrator site for the National Diabetes Prevention Programme.
- b) The district continues to have one of the lowest rates of delayed transfers of care (DTOC) nationally and continues to minimise the use of hospital beds following emergency admission.

- c) Although our care population is rising, we continue to out-perform our statistical neighbours.
- d) Bradford Social work: Bradford has been awarded over £600,000 to become a Teaching Partnership (with Bradford University, Bradford College and Bradford Council), the only standalone Teaching Partnership in the country.
- e) National capital investment was secured into specialist children's mental health services that will enable more young people to receive care closer to home.
- f) Bradford has been held up by West Yorkshire Police as an exemplar of good practice for our Missing Policies and Procedures.
- g) Cleaner engine technology has been retrofitted to 25 service buses and 165 school buses in the city.

3.3.13 Safe, clean, active communities

- a) Since the implementation of the Public Spaces Protection Order (PSPO) in May 2017 alcohol has been confiscated 466 times. There were 555 alcohol incidents recorded by the Police for the period 1st April 17 – 31st Dec 17. This is a 25% reduction on the same period the previous year. The reduction for the city centre at 35% is greater than the district as a whole.
- b) The Neighbourhood Hub has brought together the existing hub with the police partnerships team including the new stronger communities' engagement officers.
- c) Bradford has been selected by MHCLG to be part of the integrated communities area-based programme.
- d) Due to the success of the mini grants to support Big Lunches and Great Get Together events, this is being repeated and has also been featured on the Eden Project website and with the LGA as a good practise case study.
- e) The number of volunteers and volunteer placements increased significantly throughout the year.

3.3.14 Decent homes that people can afford to live in

- a) We have delivered 188 new affordable homes, mainly as part of the 2015/18 Affordable Homes Programme which has been agreed between Homes England, the Council, and other Registered Social Landlords (RSL's) in the district.
- b) We have improved conditions in 1,012 private sector properties through a combination of financial assistance to homeowners, and enforcement activity, to ensure that private rented accommodation meets basic health and safety standards.
- c) We have delivered around 330 adaptation schemes for people with disabilities to support them living in their own home.
- d) Through the No Second Night Out (NSNO) service we have assisted 739 people who are rough sleeping or at risk of rough sleeping.
- e) A multi-agency response was provided via Bradford Cares, to address the issues of rough sleeping and begging within the city centre. During the year, partners approached rough sleepers and beggars in the centre and assisted them in engaging with the services on offer.
- f) We have resettled 110 vulnerable refugees in the district on a fully-funded basis through a Home Office scheme.

3.3.15 Once approved by the Health and Wellbeing Board the annual report will be published on the Bradford District Partnership web site. The next annual report will be prepared in April/May 2019 providing a view from 2018/19.

3.3.16 Next step - District Plan performance framework alignments

As part of the review of the BDP governance arrangements, it was agreed that Partnerships should become more closely aligned. As such work is currently taking place to ensure that reporting is consistent between partnerships to encourage a coherent story of place and brand for Bradford. This work includes bringing together performance management through aligned Logic Models – a tool used to help evaluate the effectiveness of programmes. This step has been supported by the chairs and deputy chairs of each of the BDP Partnerships.

3.3.17 This is also an opportunity to capture the new emerging performance indicators/success measures being set by the Partnerships to align with their new strategies – for example the new Bradford Economic Strategy. The detail of this along with the updated performance management framework will be presented to this Committee at a future date, as a means of supporting the Committee in its role overseeing the delivery of the District Plan

3.4 Sub group updates – ECB and ICB

3.4.1 Executive Commissioning Board

3.4.1.1 ECB met on 26th October 2018 and discussed a number of key integrated commissioning projects. An update of the progress of recommissioning of the Carers Service was presented to the Board. The process has involved significant consultation exercises with carers and their families in order to ensure that a broad range views were considered through the process. The work stream continues to be monitored by ECB. An item was also brought to the Board for discussion of a new piece of joint commissioning work around services for young carers bringing together the currently separate contractual and monitoring arrangements.

3.4.1.2 A progress update on the Transforming Care Partnership for people with Learning Disabilities and Autism was brought for discussion, detailing the progress made within the Bradford district and Airedale, Wharfedale and Craven. In addition, discussions were held around the fair cost of care and the CQC action plan progress.

3.4.1.3 The next meeting will take place in November.

3.4.2 Integration and Change Board

3.4.2.1 The Integration and Change Board met on 26th October. The main focus of the meeting was on financial and business planning for the year ahead. ICB agreed that as a health and care system we would use the current planning round to refocus investment in accordance with our Happy Healthy at Home plan. We will make differential investments to support the 'left shift' emphasising our focus on prevention, rather than investing equally in all portfolios. ICB noted that clarity of plans will be critical and a shared approach to the engagement of regulatory bodies will be required, along with clear shared management of system risks.

3.4.2.2 ICB also reviewed progress against ambitions for coherent communication and marketing of our place. While noting the level of hard work undertaken by teams, it was agreed that a new proposal will be brought forward to accelerate progress in relation to system wide communications. This theme was also reflected in the review by ICB of the CQC action plan, where positive progress was noted.

3.4.2.3 ICB endorsed a sector-led approach to quality improvement and sustainability in care homes and home care services. Subsequently commissioning organisations agreed to provide financial support for the implementation of this plan.

3.4.2.4 The meeting also reflected on the recent system development events (21st September and 5th October). The importance in supporting a sense of collective action and identity was noted. A specific proposal arising from the Voluntary and Community sector was agreed. This proposal will strengthen leadership and governance, enhance cross sector understanding and support leadership development.

3.4.2.5 ICB also welcomed the development of logic models related to the joint health and wellbeing strategy and agreed to support the further development of logic models related to the happy Healthy at Home plan, which would in time replace the current dashboard arrangements in use at ICB.

3.4.2.6 ICB noted a positive highlight report from the Self Care and Prevention programme, and agreed to support the forthcoming Self Care Week 2018.

3.4.2.7 On 21st Sept, ICB hosted the Health and Care development day and opportunity to:

- Enable NEDs and similar to engage in debate about the future from a system (rather than organisational) perspective
- Enable key system partners to meet each other and make cross system connections – relationship building
- Recognise the great stuff that is going on here, and raise awareness of current collaborations, and future plans

3.4.2.8 Review of outputs - During the event participants shared their views on the opportunities and challenges ahead (post-it note exercise). There was a good degree of commonality between the points made and they were grouped into ten themes (described below).

4. FINANCIAL & RESOURCE APPRAISAL

If there are no financial issues arising this should be stated, but only on advice from the Assistant Director Finance and Procurement.

5. RISK MANAGEMENT AND GOVERNANCE ISSUES

There are no significant risk management or governance issues arising out of the

recommendations of this report.

6. LEGAL APPRAISAL

The Health and Social Care Act 2012 amends the Local Government and Public Involvement Act 2007 to introduce duties and powers for Health and Wellbeing Boards in relation to Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs).

The purpose of a local Health and Wellbeing Board as established under the Health and Social Care Act 2012 is to act as a forum in which key leaders from the Health and Care system work jointly to improve health and wellbeing of their local population.

The Health and Wellbeing Board is responsible for promoting greater integration and partnership between bodies from the NHS, Public Health. The Statutory duty is to produce a strategic needs assessment and a joint Health and Wellbeing strategy for the local population of Bradford.

The Health and Wellbeing Board has limited formal powers and are constituted as a partnership forum rather than an executive decision making body.

Health and Wellbeing boards do not have the powers to take on full range of commissioning, although some can be achieved by the Health and Wellbeing Board being designated as a joint committee of the local authority cabinet and Clinical Commissioning Group governing body or delegating specific functions to the Board.

The specific purpose of the Chair's highlight report is to provide an update as to business conducted in the period of time between Health and Wellbeing Board meetings.

Statutory Guidance on Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs) has been published by the Department of Health. In preparing JSNAs and JHWSs Health and Wellbeing Boards **must** have regard to the statutory guidance issued by the Secretary of State.

JSNAs are assessments of the current and predicted future health and social care needs of the local population, produced by Health and Wellbeing Boards.

JHWSs are strategies for meeting the needs identified in JSNAs. Local Authorities and Clinical Commissioning Groups (CCGs) have equal and joint duties to prepare JSNAs and JHWSs, through the Health and Wellbeing Board.

The purpose of JSNAs and JHWSs is to improve the health and wellbeing of the local community and reduce inequalities for all ages. They are the basis of continuing strategic assessment and planning. Plans for commissioning services, to improve the public's health and reduce inequalities are informed by relevant JSNAs and JHWSs.

With regard to issues of transparency and accountability JSNA and JHWS outputs must be published (s.192 and s.193 of the Health and Social Care Act 2012). Making them public will inform the local population of the Board's assessment of local needs and how it proposes to address them. It assists in transparency of decision-making and the possibility that the Board can be held to account by the public.

The Logic Model approach has been suggested as a local measure which would evidence progress against the JHWS and, therefore, meeting the requirement to demonstrate progress in improving local health and care outcomes.

The statutory guidance published by the Department of Health stipulates that it is mandatory for Health and Wellbeing Board to meet the Public Sector Equality Duty under the Equality Act 2010, consideration should be given to this throughout the JSNA and JHSW process.

7. OTHER IMPLICATIONS

7.1 EQUALITY & DIVERSITY

The work of the partnerships around the delivery of the District Plan outcomes will include promoting equality for all communities and individuals. A strategic view of equalities is undertaken by the Equalities and Community Relations Strategic Group which reports directly to the Integration/Stronger Communities Partnership. This group focusses on addressing any disproportionate impacts for the people of the district alongside its community relations work. It also enables cross organisation discussions and action planning and ensures equality is embedded in the work of all the partnerships.

This report does not specifically respond to any of the Council's own equality objectives.

7.2 SUSTAINABILITY IMPLICATIONS

There are no sustainability issues arising from this report.

7.3 GREENHOUSE GAS EMISSIONS IMPACTS

Bradford District Plan - Air quality and emissions are included as areas which the BDP needs to focus on in reaching its better health, better lives outcome.

7.4 COMMUNITY SAFETY IMPLICATIONS

Bradford District Plan - The Community Safety Partnership has oversight of district wide activity on community safety, and this report provides an update on their progress. Along with the BDP's new governance arrangements, the Health and Wellbeing Board meetings will include a quarterly focus on each of the outcomes of the District Plan – this will include a contribution from the Community Safety Partnership.

7.5 HUMAN RIGHTS ACT

The Human Rights Act 1998 makes it unlawful for any public body to act in a way which is incompatible with an individual's human rights. Where an individual's human rights are endangered, Local Authorities have a duty to balance those rights with the wider public interest and act lawfully and proportionately. For this highlight

report there are no human rights issues arising, no executive decision making process is being carried out.

7.6 TRADE UNION

There are no trade union issues arising from this report.

7.7 WARD IMPLICATIONS

The work of the Bradford District Partnership has a strong localities focus. The implementation work for the outcomes will have implications for all wards in Bradford District.

7.8 AREA COMMITTEE ACTION PLAN IMPLICATIONS

N/A

7.9 IMPLICATIONS FOR CORPORATE PARENTING

N/A

7.10 ISSUES ARISING FROM PRIVACY IMPACT ASSESMENT

N/A

8. NOT FOR PUBLICATION DOCUMENTS

None

9. OPTIONS

None

10. RECOMMENDATIONS

1. **One workforce** – the Board notes the progress to date.
2. **JHWS logic model:** The Board approves the logic models and the approach set out to monitor the impact of the JHWS
3. **BDP Plan:** The Health and Wellbeing Board are asked to note the content of the District Plan progress report and
4. **BDP Plan:** Where Health and Wellbeing Board feel that particular areas of work highlighted in the progress report need greater focus or more cross partnership co-ordination, that officers and relevant BDP Partnerships be tasked to take action as appropriate.

11. APPENDICES

Appendix 1: Joint health and wellbeing board logic models

Appendix 2: Annual Outcome Report

Appendix 3: Bradford District Plan Annual Progress Report 2017/2018

12. BACKGROUND DOCUMENTS

Report to Bradford Council's Executive – BDP Governance Changes (6 March 2018)

<https://bradford.moderngov.co.uk/documents/s19393/Doc%20BE.pdf>

Report to the Health and Wellbeing Board – Terms of Reference (17 April 2018)

<https://bradford.moderngov.co.uk/documents/s20004/Document%20O-%20revised.pdf>