

# Reading Health and Wellbeing Board

Workshop - 24<sup>th</sup> March 2025

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# Introduction and welcome



# Purpose of workshop

- To reflect on the feedback from Board member interviews
- To hear about national learning on good practice
- To develop a shared view of the role, purpose and priorities of the Board
- To consider new ways of working and how to create action and impact.



# Process

- We met with the Director of Public Health (DPH), Council Leader and Health and Wellbeing Board (HWB) chair to discuss and agree the scope of the review
- We carried out 11 interviews with members of the HWB and colleagues who support the Board
- The interviews were non-attributable, and we have triangulated the key messages across the interviews.
- Experience from the LGA providing support to other HWBs considered
- The feedback from the interviews is the start point for an improvement workshop with the HWB.
- The outputs of the workshop are developed by the Council and partners into a report to come back to the next meeting of the HWB setting out the action to be taken.



# Key Themes

The key themes we covered in interviews were:

- Role and purpose of the HWBB
- How it fits into the wider governance of Reading Council and the NHS.
- Strategy and priorities
- Agenda setting
- Membership
- Ways of working and culture
- Implementation support
- Achieving and measuring impact



# Strengths

- Relationships across the partnership are constructive
- Members, officers and the partners show a commitment to the Board and partnership working
- A three Borough Berkshire West HWB strategy has been developed.
- There is good self awareness and much consensus on how the Board has been working
- There is a strong commitment to making improvement
- It's a forum for information sharing and updates from partners on key developments in their organisations and parts of the system
- There has been good work on health and care integration, the BCF and some health inequality projects (although people are not sure that these have resulted from the work of the HWB).
- The administration of the Board is very professional.



# Areas of Development

## 1. Role, Strategy & Priorities

- There isn't a consensus on purpose and the roles of the HWB – remember the goal is a strategic partnership rather than something which feels like a committee of the council.
- Everyone agrees that it hasn't carved out its unique niche in Reading governance (e.g. ACE, CYP, Community Safety Partnership) and within the ICS. HWB's should not focus on scrutiny.
- Some of the ideas for its role included; to own the local population health analysis, drive improvement in health inequality, to provide constructive challenge and accountability, to support the integration of local services and to bring the wider powers of the Council to bear on the social determinants of health.
- The Berkshire West HWB strategy isn't fully owned in Reading and the HWB is not operating strategically.
- There is a need for a Reading expression of strategy and priorities
- In addition to its formal role the board could be a forum that motivates action, develops relationships and supports innovation and improvement.
- Some of the key agendas that feature in other HWB across England don't feature as prominently in Reading e.g. population health, neighbourhood working, prevention.



# Areas of Development

## **2. Governance**

- The agenda is not strategic and purposeful or informed by the purpose of the HWB
- The focus of conversations is to be determined by the board
- The HWB is not making an impact on the priorities that are important to Reading
- The three 'people' statutory officers of the Council and their services relate differently to the Board as the purpose and role/s of the board are not clear in relation to the priorities being discussed
- There may need to be a review and refresh of membership - form follows function so this would need to be looked at once the purpose of the board is agreed.
- The agendas, paperwork and the meetings are too long. – and are not making a difference, mainly for information or noting – and usually seen elsewhere. Only information that helps facilitate and inform conversations should be provided.
- Partners are not always represented at senior level.





# Areas of Development

## **3. Implementation Support and Impact**

- Interviewees found it hard to think of major impacts from the Board's work.
- There is no supporting officer structure to bring together advice for the Board and to take forward decisions and initiatives. DPH's and their teams are often central to this, but all partners need to contribute.
- There is no strategy for communication and engagement with the public – the HWB needs to think about how it engages neighbourhoods'/community/ other partners and wider stakeholders in relation to each priority.
- This doesn't mean all or most meetings being held in public. It is for you to own and manage.
- There is no dashboard against which to measure progress on solution and outcome.



# What makes an effective Health and Wellbeing Board (HWB)?



## **STATUTORY RESPONSIBILITIES**

- HWBs continue to be responsible for the Joint Strategic Needs Assessment (JSNA), publishing a Joint Health & Wellbeing Strategy, developing a Pharmaceutical Needs Assessment.

## **LEADERSHIP**

- The ultimate success of a HWB revolves around leadership. In the context of a HWB, leadership is a team sport. The business of leading a HWB is a shared endeavour and system leaders and anchor institutions all need to be accountable for the leadership contribution they make.

## **PURPOSE AND FOCUS**

- HWBs need to be clear about their primary purpose to drive hard on the wider determinants of health, thereby reducing health inequality. HWBs should elevate a precious small number of shared and agreed priorities above and beyond business as usual. HWB outcomes are for the medium- and long-term. There are no quick fixes, just the need for laser focus and dogged determination.

## **MAKING A DIFFERENCE**

- HWBs need to be clear how they are making a difference and be able to confidently articulate that difference to itself, constituent organisations, wider stakeholders and the population it serves.



## **PARTNERSHIP WORKING**

- HWBs are strategic partnerships and should be a place of strategic action, amongst leaders in place. HWBs will not be able to achieve their intended potential unless there are strong partnerships within and outside the council that hosts them at system, place and neighbourhood levels

## **GOVERNANCE**

- Clarity of purpose and understanding the surrounding partnership landscape is key to HWB success. HWBs fail when they behave like committees of council or fail to recognise the boundary that lies between them and Health Overview and Scrutiny (HOS). Getting the right people in the room, to have the right conversations, with the right frequency is something that requires deliberate and continual effort

## **CAPACITY AND RESOURCING**

- The potential of a high functioning HWB is immense, but it is impossible to achieve that potential without adequate resourcing. In all scenarios, there is a strong spend to save rationale, and the investment required needs to be recognised by all anchor institutions in place.



# Top tips

## **MAKING THE GEOGRAPHY WORK**

- Partners will work across different geographies and understanding what this means for each place is needed to know where priorities/actions are being driven and achieved
- In some areas there will be combined authorities and devolution and HWBs need to agree effective ways of working for their context
- HWBs should see one of their key roles as orchestrating what needs to happen to achieve the priorities agreed in the Joint Health & Wellbeing Strategy

## **CLARITY OF ROLE**

- Effective HWBs have a shared understanding of the role/s and purpose of the board and what it is trying to achieve asset out in its Joint Health and Wellbeing Strategy
- With the emergence of Health & Care Partnerships/Place/Locality Committees of the ICB in each area, it is even more important that there is a shared understanding of the distinctive role of the HWB
- Effective places work so that HWBs focus on the wider/social determinants of health with place/locality health & care partnerships (under ICS structures) focusing on ill-health/health & social care integration. A collaborative approach should be taken for the HWB to sign off the Better Care Fund (BCF)



# Top tips

## **A FOCUS ON PLACE**

- Understand what is distinctive about your place including its challenges and its assets. This will include data from the JSNA but also draw on the knowledge of partners & stakeholders including the VCS and elected members
- Look at issues and make decisions from a place rather than an organisational perspective
- Bring to bear the collective power and influence of partners & stakeholders at place to make a real difference

## **COMMITTED LEADERSHIP**

- HWB Chairs must see their role as important and deserving of the time and focus needed. They must be able to influence not just their own council but across health and care partners & stakeholders – system/place/neighbourhood levels

## **‘COLLABORATIVE PLUMBING’**

- Having mechanisms in place for practical collaboration and strong personal relationships is essential
- With the arrival of Integrated Care Systems, Combined Authorities & devolution there needs to be similar mechanisms allowing work and relationships to flourish across bigger geographies as needed

