

## Discussion paper

### **The future of the Tower Hamlets Health and Wellbeing Board – discussion paper**

#### **1. What is the issue?**

- 1.1 Since the original establishment of health and wellbeing boards in 2013, the landscape of health and care system has changed significantly. However, health and wellbeing boards remain statutory committees of the council.
- 1.2 In Tower Hamlets, the drive for greater integration of health and care services has resulted in the development of Tower Hamlets Together as a vehicle to bring health and care partners together. The Tower Hamlets Together Board reports into the Health and Wellbeing Board and the North East London (NEL) Population Health and Integration Committee.
- 1.3 From the perspective of the North East London Integrated Care Board, Tower Hamlets Together is framed as the local Place Partnership and is a formal sub-committee of the ICB.
- 1.4 Both locally and nationally there has been a discussion about the relationship between Health and Wellbeing Boards and local integration boards such as Tower Hamlets Together.
- 1.5 As elsewhere, an overlap has emerged between both the membership and agendas of the Health and Wellbeing Board and Tower Hamlets Together Board.
- 1.6 It is therefore timely to review how the Tower Hamlets Together Board can best exercise its accountability to the Tower Hamlets Health and Wellbeing Board to minimise duplication and increase transparency to residents.

#### **2. Why is this important for Tower Hamlets?**

- 2.1 The recently published Darzi report set out a context of deterioration of the health of the nation, rising demand for healthcare, social care challenges and the impact of adverse economic and societal trends on health. These trends reflect the challenges we face in Tower Hamlets which are magnified by the levels of deprivation and poverty in the borough.
- 2.2 Meeting these challenges will require outstanding partnership working across the health and care system and beyond. The Tower Hamlets Health and Wellbeing Board and the Tower Hamlets Together Board bring together the system leaders to drive this.
- 2.3 It is vital that these Boards work as effectively as possible to ensure that our collective assets address health inequalities and have the greatest impact in ensuring that residents have access to the highest quality health and services and are supported to be as healthy as possible.

### **3. What is the current situation?**

- 3.1 The Health and Wellbeing Board is a statutory committee of the council chaired by the Lead Member for Health, Wellbeing and Social Care and meets quarterly.
- 3.2 The Tower Hamlets Together Board is a subgroup of the Tower Hamlets Health and Wellbeing Board and a statutory subcommittee of the North East London (NEL) Integrated Care Board. It is chaired by the Chief Executive of the Royal London Hospital and meets monthly. The Tower Together Board oversees several subgroups that bring together system partners.
- 3.3 The membership of both Boards is similar (senior leaders across council, Integrated Care Board, acute trust, mental health trust, primary care, voluntary sector and Healthwatch). The main difference in membership is that Tower Hamlets Health and Wellbeing Board includes elected representatives. Review of the agendas highlights that there is frequent duplication of agenda items.
- 3.4 From a strategic perspective, the Tower Hamlets Health and Wellbeing Strategy Framework sets out six system wide improvement principles developed with residents:
1. Better targeting
  2. Stronger networks
  3. Equalities and anti-racism in all we do
  4. Better communications
  5. Community first in all we do
  6. Making the best use of what we have
- 3.5 It also sets out five ambitions for a healthy borough developed with residents:
1. Everyone can access safe, social spaces near their home to live healthy lives
  2. Children and families are healthy, happy and confident
  3. Young adults have the opportunities, connections and local support to live healthy lives
  4. Middle age and older people are supported to live healthy lives and get support early if they need it
  5. Anyone who needs help knows where to get it and is supported to find the right help
- These principles and ambitions are reflected in Tower Hamlets Together workstreams.
- 3.6 There is a common coproduction framework developed with residents signed off by the Health and Wellbeing Board and the Tower Hamlets Together Board with the following principles
1. Power should be shared amongst all partners
  2. Embrace a wide range of different perspectives and skill
  3. Respect and value of lived experience
  4. Ensure that there are benefits to all partners involved in coproduction
  5. Go to communities, do not expect them to come to you
  6. Work flexibly
  7. Avoid jargon and ensure communities have access to information at the right time
  8. Relationships with communities should be built for the long term
  9. Make sure coproduction activities are adequately resourced

3.7 There is a statutory requirement for Health and Wellbeing Boards to develop a Health and Wellbeing Strategy and a statutory requirement to the Integrated Care Board to produce a Place Plan (which is met through the THT Partnership Plan).

**4. Where do we want to be?**

4.1 This is for discussion. Whilst there are strong foundations to build on, there is an opportunity to clarify the relationship and working practices between the Health and Wellbeing Board and Tower Hamlets Together Board. Areas of improvement include the following:

1. Clear lines and exercise of accountability from the Tower Hamlets Together Board to the Tower Hamlets Health and Wellbeing Board and to the NEL Population Health and Integration Committee.
2. Better alignment and planning of the two Boards to ensure that their work is complementary, non-duplicative, efficient and impactful with clear delineation of roles and responsibilities
3. Alignment of the Health and Wellbeing Strategy principles to the priorities of Tower Hamlets Together plan to create a single Tower Hamlets Health and Wellbeing Strategy (and to situate this in the context of the Tower Hamlets Partnership Plan and the Council Strategic Plan)
4. Increased resident involvement in Tower Hamlets Health and Wellbeing Board meetings and events informed by the principles of the coproduction framework signed off by the Board to meet the requirement from national guidance that 'decisions are made as close to communities as possible'. The coproduction Framework could provide principles to inform how the meetings are conducted:

<b>Coproduction Framework signed off by Health and Wellbeing Board</b>	<b>Suggested implications for Health and Wellbeing meetings</b>
Power should be shared amongst all partners	Coproduction of the agenda
Embrace a wider range of perspectives and skill to ensure these are represented in the project	Bring a range of voices to Health and Wellbeing Board meetings
Respect and value the 'lived experience' and how different forms of knowledge can be expressed and transmitted	Use creative ways to bring community insight to the Board
Ensure that there are benefits for all parties involved in the coproduction activities	Ensure people's time for involvement with the Health and Wellbeing Board is properly recognised
Go to communities. Do not expect communities to come to you	Think about having meetings outside the council, widen IT access and promote within communities
Work flexibly	Reflect on what will work around Board meetings taking into account resident perspectives (eg thinking about what times will work to support participation)

Avoid jargon and ensure communities have access to the right information at the right time	Holding Board to account to use inclusive language and call out jargon
Relationship with communities should be built for the long term and not the short term	Meetings should not be one off events but ongoing dialogue with residents promoted through health and wellbeing networks linked to Board
Coproduction activities with communities must be adequately resourced	If the approach is agreed, it will be costed and funding discussed with partners (partners support expected to include in kind contribution)

## 5. How are we going to get there?

- 5.1 In thinking through next steps, it will be important to develop clarity on the respective roles of the two boards.
- 5.2 The Health and Wellbeing Board strategic focus is on the wide range of factors that impact on the health and wellbeing of residents in the borough and drive health inequalities. This scope includes the health and care system but goes beyond this and encompasses social and economic determinants of health such as housing, poverty, employment, education, community safety and environment.
- 5.3 The focus of the Tower Hamlets Together Board as a subcommittee of the Health and Wellbeing Board is specifically on system leadership of the integration and operational cohesiveness of the health and care system. However, this integration needs to be situated in the wider context that is covered by the Health and Wellbeing Board.
- 5.4 A starting point could be to align the planning of the Boards. Duplication could be avoided by the Health and Wellbeing Board hosting the Tower Hamlets Together Board on a quarterly basis as a public meeting. This would enable the Tower Hamlets Board, as a subgroup of the Health and Wellbeing Board, to discharge its accountability duty to the Tower Hamlets Health and Wellbeing Board.
- 5.5 In addition, the connection of residents to the Tower Hamlets Health and Wellbeing Board could be strengthened through a standing series of 4-6 resident health summits. Over a year these could cover resident engagement and coproduction on both priority setting and programme development around improving health and addressing inequity in health and wellbeing.
- 5.6 These could cover events around: the state of health of the borough, health priorities and reflecting existing workstreams: children and families, adult healthy lives, promoting independence, integration of the health and care system, and mental health.
- 5.7 The arrangement would mean four Health and Wellbeing Board meetings a year, eight Tower Hamlets Together Board meetings (rather than 12 Tower Hamlets Together Board meetings) and 4-6 resident facing health summits (these may not all be additional as these summits already happen).
- 5.8 This would be a more efficient arrangement and avoid duplication. More fundamentally, it would bring greater democratic accountability to the work of Tower

Hamlets Together, better strategic alignment and greater clarity and engagement for residents.

- 5.9 Finally, the Health and Wellbeing Strategy (a statutory requirement of the Health and Wellbeing Board) is to be refreshed in 2025 so there is an opportunity to develop a single strategy led by the Health and Wellbeing Board which incorporates Tower Hamlets Together priorities set out in the Tower Hamlets Place Plan.

## **6. What are the next steps?**

- 6.1 This is an initial discussion paper. If the proposal is acceptable to the Board as an initial way forward ,

- 6.2 Issues to be addressed include:

- How the Health and Wellbeing Board meetings can be reimagined to be resident centred
- Implication for governances and ensuring statutory roles of the council and the Integrated Care Board are met
- Single programme management of the Health and Wellbeing Board and Tower Hamlets Together Board as its supgroup, and in its ICB function
- Approaches to Health and Wellbeing Board resident facing summits