


Health and Wellbeing Board 24 March 2014	 Tower Hamlets Health and Wellbeing Board
Report of the London Borough of Tower Hamlets	Classification: Unrestricted
Memorandum of Understanding	

Lead Officer	Robert.McCulloch-Graham ESCW Corporate Director
Contact Officers	Deborah Cohen
Executive Key Decision?	No

Executive Summary

1. Prior to the formation of Barts Health NHS Trust, the London Borough of Tower Hamlets (LBTH), NHS East London and The City (subsequently Tower Hamlets Clinical Commissioning Group) and Barts Health entered into a memorandum of understanding (MOU) with respect to a number of health and social care factors to reduce health inequalities and improve the health of local people. The MOU also had a focus on providing employment opportunities for Tower Hamlets residents.
2. The MOU was a non-legally binding agreement and is expressed in terms of joint aspirations rather than as a detailed list of performance indicators or outcomes
3. This paper provides an update to the Health and Wellbeing Board on the actions undertaken to implement the MOU to date.
4. A copy of the full MOU is attached as Appendix 1.

Recommendations:

The Health and Wellbeing Board is recommended to:

1. The HWBB is requested to NOTE:
 - Progress made on the MOU (Appendix 2 and Appendix 3)
 - The ongoing work between LBTH and Barts Health NHS Trust around employment
 - The overlap between the MOU (especially paragraphs 7 and 8) and the

work on the BCF and integration and that the MOU may be a duplication of this area of the Board's work. This will be reflected in the update referred to below.

- That the MOU can be used as a way to maximise social value (in the sense of the Public Values (Social Value) Act 2012) and that officers will look at how to measure this more formally as a way of evaluating the success of the MOU.

2. HWBB is recommended to AGREE:

- That the MOU be reviewed in early 2014-15 and an update be taken to the Health and Wellbeing Board not later than July 2014 that reflects the above comments.

1. REASONS FOR THE DECISIONS

- 1.1 There is an overlap with the BCF and integration agenda in the borough; however ongoing work on employment needs to continue and undergo scrutiny by the HWBB.

2. ALTERNATIVE OPTIONS

- 2.1 The board is asked to note the report and agree that a review be held in 2014/15; the board may decide that this isn't the appropriate course of action.

3. DETAILS OF REPORT

The MOU covers the following areas:

MOU	Comments
1. Improve the health and healthcare of people who live, visit or work in the borough and in particular to reduce health inequalities.	Key role of Public Health who since the MOU have moved into the local authority. In addition there has been the appointment by BH of a director of public health and development of a range of activity.
2. Improve local access to services and information to local people about facilities so that they can choose and use	On going work programme of the HWB Board Engagement subgroup which is now well established between all parties to

the right facilities for them.	the MOU.
<p>3. Agree a programme of health promotion work to be delivered through schools to reach all pupils, their families and the wider community and to work with schools to promote careers in the local NHS</p>	<p>The Healthy Lives team work with all schools in the Borough. Through the Healthy Schools Award, schools work to improve and maintain their provision around certain health based criteria including healthy eating, drug education, physical activity, emotional health and well being and sex and relationships education. At present 89% of schools in the Borough have achieved the award and most other schools are working towards it.</p> <p>In addition the Healthy Lives team also run the Advanced Healthy Schools programme where schools carry out two specific projects aimed at making measurable improvements to their pupils health. All schools have a fixed project around obesity and choose one more; recent examples have included improving packed lunch provision, projects on improving the school dining experience.</p> <p>A programme around Mental Health resilience is being commissioned for schools.</p>
<p>4. Work closely with our local university, Queen Mary, University of London to develop new opportunities for students within Tower Hamlets to enter in to medical training</p>	<p>Not progressed at this point.</p>
<p>5. Agree a mechanism that ensures efforts regarding economic development are aligned and encourage a) big businesses to relocate to the area b) small businesses to start up and develop in the</p>	<p>Ongoing meetings between key senior staff in BH and the Council.</p>

borough	
<p>6. Agree and implement a programme to encourage and assist at least 1,000 residents of Tower Hamlets over the next two years to apply for and obtain employment in the new Trust.</p>	<p>Overall, in terms of LBTH residents as a proportion of posts currently filled, BH has approximately 15% of staff from LBTH. Since the MOU was signed over 531 residents have been employed by the Trust which has pushed the total to over 2000. See Appendix 4 for Equality Breakdown.</p> <p>Development of Recruitment Plan between Skilsmatch and Barts</p> <p>Development of Barts Health Learning Hub.</p>
<p>7. Work with the Council to actively encourage local people to make their voice heard and ensure patient and public involvement is at the heart of every aspect of the new Trust.</p>	<p>See 2 above.</p> <p>Reports from Healthwatch are received at each HWB Board meeting</p> <p>It should be noted that engagement is a part of the BCF plan that was approved at the February HWB Board meeting.</p>
<p>8. Develop robust mechanisms to report to the Council on performance with particular respect to community health services and hospital discharge pathways.</p>	<p>The role of the HWB Board in this area is set out in the Better Care Fund plan and there will be a separate set of metrics that will be monitored. The BCF can be seen to supersede this part of the MOU.</p>
<p>9. Provide opportunities for council representation in the trust governance structure.</p>	<p>Delivery of this commitment (in para 9) is tied to BH becoming a foundation trust.</p> <p>The appointment of a Council advisor to BH has not been progressed in the context of the establishment of the HWB Board.</p> <p>However BH have met with the Council leadership many times over the last year and have put structures in place to engage local</p>

	authority members in addition to working with Health Scrutiny (a statutory requirement), and sitting as co-opted members on the Health and Wellbeing Board.
10. Ensure that the Council is engaged in the development of high quality health services and provided with every opportunity to influence healthcare provision locally.	This is the fundamental objective of the Health and Wellbeing Board and the HWB Strategy. The performance of the Board is monitored by a performance framework attached to the Strategy.
11. Actively review the working arrangements and the success of collaborative working – in particular a programme of regular meetings between the Mayor and the Chief Executive of the Council, commissioners, and the Chair and the Chief Executive of the new trust.	As above - BH have met with the Council leadership many times over the last year and have put structures in place to engage local authority members in addition to working with Health Scrutiny (a statutory requirement), and sitting as co-opted members on the Health and Wellbeing Board.

4. COMMENTS OF THE CHIEF FINANCE OFFICER

- 4.1. There are no financial implications arising from the recommendations in this report. The report is dealing with the ways of working outlined in the Memorandum of Understanding.

5. LEGAL COMMENTS

- 5.1. The recommendations are consistent with the general policy, reflected in the Health and Social Care Act 2012, of giving HWBs responsibility for joint health and wellbeing strategies. As the HWB has statutory status, due regard should be given to its decision making authority within its terms of reference.
- 5.2. These recommendations are within the terms of reference of the HWB agreed by the Mayor in Cabinet on 4 December 2013, in particular to encourage integrated working between persons who arrange for the provision of any health or social services in Tower Hamlets for the advancement of the health and wellbeing of the people in Tower Hamlets.

6. ONE TOWER HAMLETS CONSIDERATIONS

- 6.1. The MOU is agreement to improve the health and healthcare of people who live in the Borough and reducing health inequalities across all the protected

characteristics as well improve employment opportunities for residents of Tower Hamlets.

7. SUSTAINABLE ACTION FOR A GREENER ENVIRONMENT

7.1 N/A

8. RISK MANAGEMENT IMPLICATIONS

8.1. The MOU is a non-legally binding agreement and nothing in the MOU is intended to require the Council to act contrary to its legal duties.

9. CRIME AND DISORDER REDUCTION IMPLICATIONS

9.1 N/A

10. EFFICIENCY STATEMENT

10.1 N/A

Appendices and Background Documents

Appendices

- Appendix 1 - Memorandum of Understanding
- Appendix 2 - Barts Health Learning Hub Scoping Document
- Appendix 3 - Update from Barts Health on MOU
- Appendix 4 - Barts Health Employment Breakdown (Tower Hamlets Data)

Background Documents

If your report is a decision making report, please list any background documents not already in the public domain including officer contact information.

- None