Local Healthwatch, health and wellbeing boards and health scrutiny

cfps Centre for Public Scrutiny

accountability, transparency, involvement

Roles, relationships and adding value

healthwatch

Local Government Association

The Centre for Public Scrutiny

The Centre for Public Scrutiny (CfPS), an independent charity, is the leading national organisation for ideas, thinking and the application and development of policy and practice to promote transparent, inclusive and accountable public services. We support individuals, organisations and communities to put our principles into practice in the design, delivery and monitoring of public services in ways that build knowledge, skills and trust so that effective solutions are identified together by decision-makers, practitioners and service users.

Local Government Association

The Local Government Association (LGA) is the national voice of local government. We work with councils to support, promote and improve local government.

We are a politically-led, cross party organisation which works on behalf of councils to ensure local government has a strong, credible voice with national government. We aim to influence and set the political agenda on the issues that matter to councils so they are able to deliver local solutions to national problems.

The LGA covers every part of England and Wales, supporting local government as the most efficient and accountable part of the public sector.

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Introduction and what we know

Local authorities, the NHS and local community organisations have a history of working together to improve outcomes for local people. The health and care reforms introduce some new structures and processes and working out how best to bring these together with continuing existing arrangements can be complex. But what remains constant throughout the transition is a shared goal: to improve health, social care and wellbeing outcomes for communities.

This guide aims to help local leaders and others to understand the independent, but complementary, roles and responsibilities of council health scrutiny, local Healthwatch and health and wellbeing boards. This guide does not aim to cover every eventuality; it is a 'snapshot' that can be a basis for discussions about how existing and new bodies will work together and how they can build on local agreements and legislative requirements.

Council health scrutiny

Councils with social care functions can hold NHS bodies to account for the quality of their services through powers to obtain information, ask questions in public and make recommendations for improvements that have to be considered. Proposals for major changes to health services can be referred to the Secretary of State for determination if they are not considered to be in the interests of local health services. The way councils use the powers is commonly known as 'health scrutiny' and forms part of councils' overview and scrutiny arrangements. From April 2013 all commissioners and providers of publicly funded healthcare and social care will be covered by the powers, along with health and social care policies arising from the Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies. Health scrutiny also has a valuable pro-active role; helping to understand communities and tackle health inequalities.

Local Healthwatch

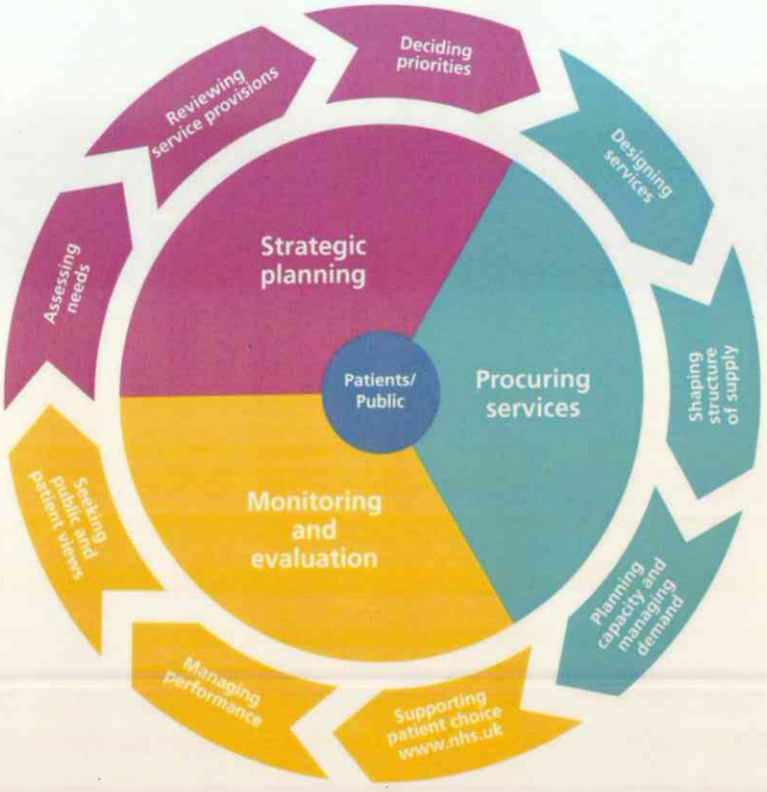
Local Healthwatch will be the local consumer champion for health and social care representing the collective voice of people who use services and the public. It will build up a local picture of community needs, aspirations and assets and the experience of people who use services. It will report any concerns about services to commissioners, providers and council health scrutiny. It will do this by engaging with local communities including networks of local voluntary organisations, people who use services and the public. Through its seat on the health and wellbeing board, local Healthwatch will present information for the Joint Strategic Needs Assessment and discuss and agree with other members on the Board a Joint Health and Wellbeing Strategy. It will also present information to Healthwatch England to help form a national picture of health and social care. Local authorities will need to ensure that their local Healthwatch operates effectively and is value for money; managing this through their local contractual arrangements.

Health and wellbeing boards

Health and wellbeing boards are committees of councils with social care responsibilities, made up of local councillors, directors of public health, adult social services and children's services; clinical commissioning groups; and local Healthwatch. They will collectively take the lead on improving health and wellbeing outcomes and reducing health inequalities for their local communities. Although set up with a minimum prescribed membership, how Boards operate will be different in response to local circumstances. Health and wellbeing boards are an executive function of the council and are responsible for identifying current and future health and social care needs

and assets in local areas through Joint Strategic Needs Assessments; and developing Joint Health and Wellbeing Strategies to set local health and social care priorities, providing a framework for the commissioning of local health and social care services. Individual Board members will be held to account in different ways (for example, clinical commissioning groups are authorised and assessed by the NHS Commissioning Board) but health and wellbeing boards can also be collectively held to account for their effectiveness through council scrutiny.

All three have a role to play in the way local services are planned and delivered. How they interact with each other will have a direct influence on improving outcomes for communities and people who use services. The 'commissioning cycle' provides a number of opportunities for each function to add value.



Courtesy of The NHS Information Centre for health and social care. Full diagram available at: www.ic.nhs.uk/commissioning

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Working together for better outcomes

Local structures and ways of working will be different. With a focus on the fundamental principle of improving outcomes for local people, there are opportunities for bodies to better work together and add value to each other's work. Here are just some ways that each can bring value to the other.

- Share information from networks of voluntary and community groups.
- Gather and present evidence and information for Joint Strategic Needs Assessments and support council scrutiny reviews.
- Use good public engagement to demonstrate the 'real-time' experiences of people who use services.
- Highlight concerns about service to council health scrutiny.
- Cascade information to people who use services and the public about services that are available.

- Bring together individual and organisational knowledge, expertise and experience.
- Develop an area-wide view of health and social care needs and resources through the Joint Strategic Needs Assessment.
- Agree area-wide alignment of services to deliver improved health and wellbeing through the Joint Health and Wellbeing Strategy.
- Facilitate shared understanding of information to improve outcomes from decision making.

- Be a bridge between professionals and people who use services.
- Bring a collective memory of public engagement, policy development and local knowledge about community needs and assets.
- Be a valuable 'critical friend' throughout transition and beyond.
- Evaluate policies arising from processes and decisions and outcomes from services.
- Consider whether service changes are in the best interests of the local health service.
- Carry out pro-active qualitative reviews that can inform and enhance policy and services.

Listening and responding to communities and people who use services is fundamental to each function but each will have different reasons and ways to gather views and experiences. Sharing information and expertise is just one example of how value can be added at different points throughout the cycle of assessing need, devising strategies, commissioning and providing services.

How might this work?

The following basic scenarios are examples of how the three functions might complement rather than duplicate each other's work.

Scenario 1: Refreshed Joint Strategic Needs Assessments indicate a need for integrated health and social care teams aligned with GP practices:

Health and wellbeing board	The Board has a duty to support integrated services and, reflecting on the Joint Strategic Needs Assessment decides to include integrated teams as a priority in Joint Health and Wellbeing Strategy.
Local Healthwatch	Undertakes local research about what people who use services are looking for, identifies gaps in service provision and feeds the outcomes into the health and wellbeing board to influence the Joint Health and Wellbeing Strategy.
Council health scrutiny	Examines the process in light of councillors' knowledge of their local area and makes recommendations about how the people who use services, particularly vulnerable groups, can be informed about changes to services. Six months after implementation of the strategy, it assesses what impact the changes have had and makes recommendations for improvement.

Scenario 2: An issue related to health inequalities: a low uptake of child vaccination in particular wards:

Health and wellbeing board	The refreshed Joint Strategic Needs Assessment indicates a low uptake which has implications for health and social care in some council wards. Because the reasons are unclear, the health and wellbeing board asks health scrutiny to review the issue.
Local Healthwatch	Through their seat on the health and wellbeing board, local Healthwatch were involved in reviewing the Joint Strategic Needs Assessment, and it now uses it's local networks to gather views about why some children are not being immunised and reports this to the Board and health scrutiny.
Council health scrutiny	Health scrutiny asks local Healthwatch to gather local views. As a result of discussions with clinical commissioning groups, schools, health visitors and social workers, makes recommendations about ways to improve the uptake of immunisations. (Alternatively, in a two-tier area the District/Borough Council in which the particular wards lie could undertake the review on behalf of the county council – this is determined and co-ordinated locally to avoid duplication).

Scenario 3: A reconfiguration of maternity services across council areas:

Health and wellbeing board	Providers have proposed this as a solution to improving outcomes and make better use of available resources. The health and wellbeing board assesses whether the plans fit their Joint Health and Wellbeing Strategy and takes a strategic view on the outcomes and engagement with the clinical commissioning groups.
Local Healthwatch	Undertakes a comprehensive exercise to gather the views from people who use services and the public, checks whether consultations reflect what is known about best practice and presents views as a health and wellbeing board member and to council health scrutiny during the formal consultation process.
Council health scrutiny	Agrees that proposals are a substantial/ significant variation, and through joint arrangements with other councils, engages in early discussions with the commissioners/ providers regarding policy, plans and consultations. It also engages during the formal consultation stage to analyse the proposals in a public forum, taking evidence and coming to a conclusion about whether the proposals are in the best interests of the local health service.

Fundamental principles

There are some fundamental principles, which have been identified by councils, these include:

- Improved health and social care are a common goal.
- Early discussions are vital to ensure no one is left out.
- Everyone has responsibility to develop relationships, not just to engage formally.
- Good relationships lead to good communication, identifying where value can be added.

The challenges, myths and solutions

Our work has identified a number of challenges for local leaders and some possible ways to achieve solutions. These challenges will be solved according to their local context and are likely to be best overcome where there is a shared willingness to work together. Whilst each function will have ways to check their progress, scrutiny can cement arrangements for transparency, inclusiveness and accountability.

Relationships – a gaze into the future...

Taking the emerging learning from our work, below is an 'appreciative' look at what roles and relationships could look like in "Healthyshire" in 2015.

Representatives from health scrutiny, local Healthwatch and the Healthyshire Health and Wellbeing Board meet together with a range of other partners to evaluate how health and care outcomes have improved over the last year. Whole system events are very popular, allowing partners to draw on their strengths and complement each other. The event creates an atmosphere of 'togetherness' where partners can contribute or challenge knowing that their views will be understood and acted on. They've got to this stage because:

Health and wellbeing board members are committed to working with others with clear lines of accountability. They encourage open and honest discussions about the challenges faced by all partners in the new landscape and have dealt with any conflicts quickly and openly. By actively seeking and sharing information, the Board has developed a comprehensive analysis of health and social care needs and assets. Balancing those needs against national and local policy it has developed a robust strategy to improve health and social care and reduce inequalities which is well understood and accepted. They work constructively with health scrutiny, welcoming their involvement. People who use services and the public are central to the Board's work, and people understand how local agencies are improving health and social care outcomes.

Local Healthwatch has built on the LINk legacy by maintaining volunteer capacity and expanding their networks to include a wide range of people and groups so that a comprehensive voice is heard at the health and wellbeing board and this is reflected in strategies and commissioning plans across health and social care. Problems are quickly brought to the attention of partners, knowing that they are listened to and acted upon. They gather and present views to support reviews carried out by health scrutiny. They have contributed to national thinking through their engagement with Healthwatch England.

Council health scrutiny has influenced health and social care in a variety of ways by encouraging transparency, involvement and accountability throughout the planning and delivery of services. Officers and councillors shared their experience and knowledge during transition so that relationships could be built. It's pro-active reviews of health and social care themes provide timely evidence and constructive recommendations to commissioners and providers. Health scrutiny is involved very early on in discussions about reconfiguration of health services and takes a view about whether changes are in the interests of local health services. It acts as a 'bridge' between politicians, professionals and communities, so that solutions are identified together.

Putting it into action

We can start by asking the right questions. Here are some that partners are already asking – you may have other questions that are relevant to your local area:

1. How do we ensure that we complement not duplicate other's work?
2. How can we best use our roles to add value so that together we improve outcomes?
3. Are we taking the right steps to build effective relationships and understanding of partners' roles and responsibilities? (Consider barriers to effective partnership working too).
4. How will we make sure we work together in transparent, inclusive and accountable ways?
5. How are we providing leadership?
6. What is working well or not so well?

For health and wellbeing boards:

1. What are we doing to demonstrate that every Board member is an equal partner?
2. How are we sharing learning and good practice with our partners and neighbours?
3. What steps are we taking to ensure that we have integrated working?
4. How are we collectively and individually demonstrating transparency, inclusiveness and accountability?
5. How are we engaging with providers to ensure delivery of outcomes?
6. How can we work alongside health scrutiny to address the wider determinants of health?

For local Healthwatch:

1. How are we balancing our dual role of 'consumer champion' and policy maker on the health and wellbeing board?
2. How have we taken the best of the LINk legacy and developed it?
3. What are we doing that demonstrates we are getting the widest range of views, particularly those of the least heard communities?
4. Can we demonstrate that we use the feedback we get to impact on our decision-making?
5. What are we doing to make it clear how we will treat any safeguarding issues we come across?
6. What steps are we taking to help health scrutiny in its role?
7. How do we plan to work with the Care Quality Commission and Healthwatch England to exchange information about the quality and safety of services?

For Council health scrutiny:

1. How can we best ensure that Joint Strategic Needs Assessments reflect needs and aspirations of local people and that Joint Health and Wellbeing Strategies reflect credible priorities that commissioners follow?
2. What steps are we taking to help people understand scrutiny and how it adds value?
3. What are we doing to pro-actively engage with clinicians but also with professionals outside health and social care?
4. How does health scrutiny work with national bodies, for example the NHS Commissioning Board, Monitor and the Care Quality Commission?
5. What can we do to be an effective 'bridge' between politicians, professionals and communities throughout the commissioning cycle?
6. Are we thinking strategically and pro-actively about how we can best use our resources to tackle inequalities and keep in touch with the experience of people who use services?

Websites

The Centre for Public Scrutiny
www.cfps.org.uk

Local Government Association
www.local.gov.uk

Care Quality Commission
www.cqc.org.uk

Healthwatch England
http://www.cqc.org.uk/public/about-us/partnerships-other-organisations/healthwatch

Publications

Health overview and scrutiny: Exploiting opportunities at a time of change
http://www.cfps.org.uk/publications?item=7008&offset=25

Smoothing the way
http://www.cfps.org.uk/publications?item=7081&offset=25

10 questions to ask if you are scrutinising arrangements for Healthwatch
http://www.cfps.org.uk/publications?item=7005&offset=25

Building successful Healthwatch organisations
http://www.local.gov.uk/c/document_library/get_file?uuid=c96a438b-dbb5-4cfa-8669-8c42a999cbdd&groupId=10171