

Development tool for Health and Wellbeing Boards

Area	Now - 2013	In 1 Year	In 3 Years	Questions for the Board
Strategy, Purpose, Vision	1. The board understands its unique potential contribution and is ambitious to improve health and wellbeing.	1. The board has agreed a realistic set of priorities on which to focus its efforts.	1. The board has demonstrated achievement against its priorities. The board has a track record of enabling efficient, effective and integrated re-commissioning of service(s).	How will we show improvement?
	2. The board has a clear statement of purpose and priorities. Existing JSNA reviewed and JHWS initiated.	2. JSNA and JHWS formally agreed. Individual commissioning plans of CCGs and LA align with JSNA/JHWS.	2. JSNA/JHWS embedded in annual plans of service providers. JSNA and JHWS reviewed and revised and commissioning plans of all relevant partners aligned.	Does the Board agree?
	3. HWB has a compelling narrative of its purpose and ambitions for its local community.	3. Partner organisations can describe how HWB will make a difference. A shared and effective communications plan exists (including media handling).	3. Community can describe how HWB has made a difference. The board can describe what	Does the Board agree?
Leadership, values, relationships, ways of working	4. Board members understand the concept of shared leadership and communicate effectively and respectfully.	4. Trust has been established, constructive challenge is the norm, a conflict resolution process is in place.	4. Continuous learning (from own experiences and from others) is well established.	Does the Board agree and how do we move to in 1 year?
	5. The board has a code of conduct which is explicit about expectations of behaviour, and which describes the values aspired to. The board models appropriate behaviours and has an agreement about minimum attendance at meetings.	5. The board uses both internal and external reviews to test that its code of conduct is effective. Board members attend regularly and make a positive contribution to meetings.	5. The board's annual self assessment incorporates agreed outcome measures against its code of conduct. Stakeholders agree that the board operates on a win-win basis.	Are the Board comfortable about developing review programmes?
	6. Members have effective working relationships and are beginning to influence each other's organisations.	6. Board members look for win-win solutions focused on beneficial health outcomes for the community. Relationships enable members to influence beyond their own organisations.	6. Local organisations seek to contribute to the work of the board.	Does the Board agree?
	7. The board has interim arrangements in place to engage users and the public pending the establishment of local Healthwatch.	7. The board empowers the local Healthwatch member to act as an independent and effective voice for users and the public.	7. The board can demonstrate that it has considered and acted upon the views of local people.	Does the Healthwatch member agree?
	8. The board understands the needs of diverse communities and is clear about its responsibilities under Equalities legislation, and those of its partners.	8. The board can demonstrate that it promotes equality in all its actions including consultation, priority setting and service improvement, and undertakes equality impact assessment on its plans.	8. The board is a beacon of excellence in relation to equality and diversity and can show positive outcomes for the health and wellbeing of minority groups.	Does the Board have proposals/plans to be a beacon of excellence?
Governance	9. The board is clear on accountability for decisions and action, and has a scheme of delegation.	9. Decision making is clear and transparent, and effectively communicated to stakeholders and the public.	9. Decisions of the HWB are accepted and acted on by all organisations in the local system.	The Board to review communications plan?
	10. The board has governance frameworks which align with those of the LA and CCGs.	10. Board membership, operational structures, and mechanisms for engaging partners, are clear.	10. The board has regular updates on the priorities of the wider LA, NHSCB and key local partners.	The Board Advisor to develop structural plans?
	11. The relationship between the HWB and the LA scrutiny function is clear.	11. The relationship between scrutiny and external regulators is agreed and an initial effectiveness review has been completed.	11. Scrutiny and regulators work constructively with the HWB.	The Board Advisor to develop structural plans?
	12. An agreement re pooling of resources is in place.	12. A risk sharing agreement exists between the LA and CCGs.	12. A risk sharing agreement exists between the LA, CCGs and other relevant partners.	Does the Board agree?
Roles and contributions	13. The board knows what each member brings in the way of skills, experience, knowledge and potential contribution.	13. Each board member has a clear role description and acts in accordance with this. An annual board development plan has been agreed.	13. The board regularly reviews its own effectiveness and development needs.	Members roles to be agreed as part of the Terms of Reference.
	14. The board knows what's good about its existing partnership working and can describe what has been successful, what hasn't, and why.	14. A stakeholder map exists for external partners and each board member has agreed partners that they work with proactively. A 360 degrees feedback survey with partners has been completed.	14. A 360 degrees feedback survey is completed with stakeholders; with key partners; with the public and an appropriate action plan developed.	Does the Board agree and are they prepared to participate in 360° survey?
Measures and accountabilities	15. The board's priorities balance improvements in service provision with improvements in population health and wellbeing.	15. The board has an agreed set of outcome measures, matched to its priorities.	15. The board's annual report demonstrates achievement of outcomes.	Does the Board agree?
	16. The board has reviewed the current position as regards service integration, population health and use of resources.	16. The board has identified outcomes with defined early wins in the areas of: A) more integrated and/or personalised services; B) improved population health; C) better use of resources	16. The board has achieved defined outcomes in the areas of: A) more integrated and/or personalised services. B) improved population health. C) better use of resources, including community based assets, and identified early wins in reducing health inequalities	Does the Board agree?
	17. The board has reviewed its current outcomes against its peer group.	17. The board reviews itself regularly against benchmarks and adapts plans as necessary.	17. The board consistently performs well against benchmarks.	This item is to be reviewed Nationally

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