



Peterborough City Council

Health and wellbeing peer challenge

11– 14 March 2014



Introduction

- LGA's new health and wellbeing system improvement programme, co-created with a number of national organisations
- Health and wellbeing peer challenge is one of the core elements
- Made to feel very welcome (special thanks to Helen Gregg)
- People have been open and candid
- Feed back key points from what we have seen, heard and been told
- In three days: 40 sessions; 6 Councillors; 3 site visits; 76 Staff and Partners; 30 Documents; and previously observed the HWB meeting

The team

- John Garrett, Deputy Chief Executive, Sandwell MBC
- Cllr Steve Charmley, previous member of the HWB/Cabinet Member for Health & Wellbeing, Shropshire Council
- Professor Kate Arden, Executive Director of Public Health, Wigan Council
- Joe Gannon, Local Government Adviser to PHE
- Richard Cienciala, Deputy Director for Health and Wellbeing, Department of Health for England
- Satvinder Rana, Programme Manager, Local Government Association

Methodology

Five headline questions:

1. Is there a clear, appropriate and achievable approach to improving the health and wellbeing of local residents?
2. Is the Health & Wellbeing Board at the heart of an effective governance system? Does leadership work well across the local system?
3. Are local resources, commitment and skills across the system maximised to achieve local health and wellbeing priorities?
4. Are there effective arrangements for evaluating impacts of the health and wellbeing strategy?
5. Are there effective arrangements for ensuring accountability to the public?

Feedback on strengths and areas for consideration

You also asked us to focus on childhood obesity

- Is there a clear and appropriate approach to reducing childhood obesity within the community? Does this approach include an understanding of childhood obesity as it effects the local population?
 - Does the council provide effective system leadership to support and promote a reduction in childhood obesity?
 - How effectively has the Council and its partners put the strategy into action?
 - Are there effective arrangements for evaluating what works? Are these arrangements comprehensive and pull together the various local interventions into one place so the system and public can see the difference that is being made?
 - How effective is community and user engagement?
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Quotes of the week

*“Good will is there, but
its early days”*

*“It’s hard to identify
priorities”*

*“History hangs
heavily”*

*“The council and the
CCG are starting to
dance with each other”*

*“Peterborough has
heart and passion”*

*“ Peterborough is
not an Island”*

Context

- A rapidly changing city and embraced
 - Sense of place and pride
 - Significant Health & Wellbeing challenges, but understood
 - Shared financial imperative across the system
 - Shared desire to work together – integration a priority
 - Talented and committed people
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Headline Messages

- Preparedness for take off
 - Relationships
 - Focus
 - Public Health leadership
 - Childhood Obesity
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Preparedness for take off

- Many examples of good practice
- Clear evidence of ability to make bold decisions
- A stronger focus on commissioning within the council
- Creation of Programme Board seen as very positive, as is the Joint Commissioning Group
- Strong information and analysis base
- Refresh of Health & Wellbeing strategy and other strategies
- Good understanding of wider determinants of health
- Good basis for emergency planning

Relationships

- Health and Wellbeing Board needs a refresh
- History is still hanging heavily
- Mutual understanding of each others challenges
- Wider political engagement needed

Focus

- Structures are in place
 - The health challenges are clearly understood
 - But there is no shared narrative about what to do and how to do it together
 - Focussed strategy and delivery plans needed e.g BCF, older people and urgent care
 - Prioritisation must address both health improvement, financial demands and sustainability
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Public Health Leadership

- Public Health function
 - Council's perception is one of integration
 - Public Health Team and partner perception is one of disintegration
 - The council's perception is one of considered re-evaluation
 - Other people's perception is one of drift and disinterest
 - Both the council and the Health & Wellbeing Board need to be properly sighted on their statutory public health assurance responsibilities with regard to health protection including emergency planning and response
 - The Health & Wellbeing Board needs to seek assurance from PHE and NHS England with regard to the performance, commissioning and quality of screening and immunisation programme
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Childhood Obesity

Our findings relating to childhood obesity illustrate the positives and challenges the system faces in working together

Key recommendations

- Build the relationships across the system
 - Reorganise the Health & Wellbeing Board
 - Agree your health and wellbeing priorities, based on need and impact
 - Link your priority actions to the financial and capacity challenges across the health and care system
 - Focus on the integration of health and care through a shared vision
 - Quickly complete the plan for moving commissioning of adult social care responsibility to Communities Directorate
 - Establish Public Health leadership and appoint a substantive DPH
 - Ensure you are sighted on the council's statutory public health responsibilities
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Next steps

- Summary report within 2-3 weeks for you to comment
- Offer of follow-up support
- On-going relationship with LGA Principal Adviser, Rachel Litherland

Thank you

Comments and questions

For more information please contact

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