



SHEFFIELD HEALTH AND WELLBEING BOARD PAPER

Report of: Councillor Julie Dore and Dr Tim Moorhead, Co-Chairs of the Health and Wellbeing Board

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Subject: Report on Health and Wellbeing Board Engagement April-September 2014

Author of Report: Louisa Willoughby, 0114 205 7143

Summary:

Health and Wellbeing Boards have a responsibility, as system leaders, to ensure that the work they carry out is transparent and appropriately involves members of the public, providers and practitioners. Sheffield's Health and Wellbeing Board has been acknowledged in the past as developing best practice in relation to engagement, and the Board recognises the importance of being a system leader.

This report is intended to provide the Health and Wellbeing Board with a snapshot of its engagement from the last six months. It focusses on *Health and Wellbeing Board-specific* engagement, and therefore does not cover the engagement carried out by the organisations that are represented on the Board. It also provides some suggestions for how that engagement can be improved.

Recommendations:

It is recommended that the Health and Wellbeing Board focus its engagement from October 2014-March 2015 on a range of areas specified in the report.

Reasons for Recommendations:

It is important that the Health and Wellbeing Board continues to be transparent and accessible in its decision-making.

REPORT ON HEALTH AND WELLBEING BOARD ENGAGEMENT APRIL-SEPTEMBER 2014

1.0 SUMMARY

- 1.1 Health and Wellbeing Boards have a responsibility, as system leaders, to ensure that the work they carry out is transparent and appropriately involves members of the public, providers and practitioners.
- 1.2 Sheffield's Health and Wellbeing Board has been acknowledged in the past as developing best practice in relation to engagement.¹ The Board recognises the importance of being a system leader in action 1.1 of the Board's Joint Health and Wellbeing Strategy, which states sets out a desire to:

Influence partners and organisations across Sheffield to consider and demonstrate the positive health and wellbeing impacts of policies, encouraging all organisations to make health and wellbeing a part of what they do.

- 1.3 This report is intended to provide the Health and Wellbeing Board with a snapshot of its engagement from the last six months. It also provides some suggestions for how that engagement can be improved.
- 1.4 The report is the first of its kind, and we intend for the next update to be presented to the Board at its public meeting in March 2015. The report does not consider the engagement the Board carried out from April 2013-March 2014, although information about this and reports from events held are available on the Board's website.² Furthermore, the report focusses on *Health and Wellbeing Board-specific* engagement, and therefore does not cover the engagement carried out by the organisations that are represented on the Board.

2.0 WHAT DOES THIS MEAN FOR SHEFFIELD PEOPLE?

- 2.1 It is important that the decisions of decision-makers are accessible and transparent, enabling local people to be informed and, where they wish to be, involved in the decisions made.
- 2.2 Sheffield's Health and Wellbeing Board has from the start sought to:
- Communicate what the Board is doing and when its meetings are happening, and ensure these meetings take place in a space that is appropriate and large enough for members of the public to attend.
 - Publicise and publish its papers and presentations, and report back on what was discussed, including in real time through a Twitter feed.
 - Involve people in the making of key strategic city-wide decisions through engagement events and consultations, and through the opportunity to ask a question publicly at more formal meetings.

¹ See, for example, *Stronger Together: How Health and Wellbeing Boards can work effectively with local providers* and *Good Practice in Joint Health and Wellbeing Strategies*, both online at <http://www.nhsconfed.org/resources/2014/08/resources-for-health-and-wellbeing-boards>.

² See <http://www.sheffield.gov.uk/healthwellbeingboard>.

- Advertise more specific consultation efforts of the organisations that make up the Health and Wellbeing Board: Sheffield City Council, NHS Sheffield Clinical Commissioning Group, NHS England and Healthwatch Sheffield.

2.3 As well as focussing on Sheffield people as citizens, service users and patients, the Board has also sought to provide opportunity for health and wellbeing providers, practitioners, interest groups and others to provide comment.

2.4 This report demonstrates the Board's efforts to reach a wide audience of people, and make suggestions for how the Board's approach could be developed over the next six months, to enable Sheffield people to be even more involved in the process.

3.0 HEALTH AND WELLBEING BOARD ENGAGEMENT APRIL-SEPTEMBER 2014

This report will cover the Board's engagement from April-September 2014 focussing on four main areas:

- Meetings.
- Communication.
- Consultation.
- Local, regional and national connections.

3.1 Meetings

- Over the period April-September 2014, the Board held one **formal public meeting** in June, with another being held in September and which will receive this paper.
 - Around 25 individuals attended to observe the meeting in June, which is perhaps slightly less than usual.
 - Attendees to observe included representatives from housing associations, voluntary sector organisations, South Yorkshire Police, the city's two universities, students, trades unions, NHS providers and pharmaceutical companies, as well as individual service users.
 - A number of public questions were asked – if responses are not given on the day, they are provided in writing after the meeting and published in the minutes.
 - Presentations from the meeting were published online and then advertised in the Board's next newsletter.
- Over the period April-September 2014, the Board held two **engagement events**, one in May on tackling health inequalities, and one in July on mental health.
 - Both events were very popular, with around 100 attendees at each. The event on mental health focussed particularly on encouraging service users to attend. The events were advertised to the Board's main network as well as through other organisations including Healthwatch Sheffield.
 - Healthwatch Sheffield organised a follow-up event in early June on the topic of tackling health inequalities, and helped to organise the mental health event in July.
 - There was live tweeting throughout both events and presentations/reports from the events were published online and then advertised in the Board's next newsletter. British Sign Language interpreters are available on request.
 - Each event attracted new individuals who had not previously attended Health and Wellbeing Board events before. In May, 69 individuals were added to our email list, and in July, 19 were.

- The events make a difference to decision-making: for example, the report from the event on health inequalities was then taken to June's formal public meeting, and the report from the event on mental health is being taken to September's.
- From time-to-time, the Health and Wellbeing Board holds other meetings. For example, in July several **Board members met with business leaders** who work in healthcare technologies.

3.2 Communication

- The Board's most comprehensive vehicle for communication is its **newsletter** which it sends out monthly except for combined July/August and December/January editions.³
 - The number of people receiving the newsletter has steadily increased, and there are currently just over 1,700 people on the distribution list. Some of these are providers and practitioners, and some are service users, patients and citizens.
 - The newsletter provides regular updates on the Board's meetings and activities. Each month has a spotlight on one of the Board's five work programmes and links to recent presentations, event reports and other social media.
 - Newsletters are printed and posted to individuals on request.
- The Board has a **website** which has recently been refreshed to be clearer and simpler.⁴ In total, in March-August 2014 the website's pages have received nearly 7,000 unique views – some to the main homepage; others directly to specific pages from links in newsletters.
 - The top five pages in terms of unique hits are:
 - Joint Health and Wellbeing Strategy – 970 unique hits.
 - Integration of health and social care – 756 unique hits.
 - Joint Strategic Needs Assessment – 560 unique hits.
 - About the Health and Wellbeing Board – 527 unique hits.
 - Visitors spend quite a long time on the pages, which is a sign that they have found the information they are looking for and are reading it. The bounce rate of the 'homepage' is low, meaning that people are staying on the site to explore further.
 - There are spikes in visitor numbers when the newsletter is sent out.
- The Board also uses a number of **other online resources** to publicise its work and ensure information is readily available. For example:
 - Regular updates and opportunities to engage are posted on Twitter.⁵ At the time of writing, the Board has 814 followers.
 - All presentations are posted on Slideshare.⁶ The most popular presentations over the last six months at the time of writing have been:
 - Presentation on the Care Act – 216 views.
 - Update on the integration of health and social care – 202 views.
 - Presentation on the Children and Families Act – 144 views.
 - The Board has started to use Storify to create accounts about its events and meetings.⁷ The report of June's formal public meeting had been viewed by 103 people at the time of writing.

³ See <http://us6.campaign-archive1.com/home/?u=4c519d652065c050d46e2444e&id=d680dbeecd>.

⁴ See <https://www.sheffield.gov.uk/healthwellbeingboard>.

⁵ See <https://twitter.com/sheffieldhwb>.

⁶ See <https://www.slideshare.net/sheffieldhwb>.

⁷ See <http://www.storify.com/sheffieldhwb>.

- From time-to-time, videos about the Board’s work or interviews of Board members are posted onto YouTube.⁸ A recent introduction to one of the Board’s projects had been viewed by 62 people at the time of writing. Transcripts are available on request.
- The Board has also ensured it communicates clearly about potentially complex matters through creating **summary documents**. For example, a one-page summary of the feedback from the tackling health inequalities engagement event was published, and a six-page summary of the 50-page Better Care Fund submission was made widely available. Furthermore, printed summary copies of the Joint Health and Wellbeing Strategy have been distributed widely.

3.3 Consultations

- From April-September 2014 the Board’s primary means of consultation has been through its **engagement events**, and then vicariously through the individual engagement of the Board’s member organisations, some of whose activities were advertised in the Board’s e-newsletter.
- However, in April the Board did conclude an opportunity via **SurveyMonkey** for individuals to express an interest in being involved with the integration of health and social care work. 234 individuals responded to this. Individual projects as part of the integration work have then consulted as appropriate for their particular schemes.

3.4 Local, regional and national connections

- As the representative of Sheffield people, **Healthwatch Sheffield** has an important role to play in engaging with Sheffield people on the Board’s behalf and on feeding this information back into the Board.
 - In the period April-September 2014, Healthwatch Sheffield used its experience and feedback to plan the mental health engagement event, and provide introductions for the Board into the transition between services and information and advice.
 - Healthwatch Sheffield have also been invited to comment on the review of outcome 1 of the Joint Health and Wellbeing Strategy.
- In addition, the **Board’s member organisations, and health and social care providers across Sheffield**, also all do engagement themselves. For example, in the past few months consultations and engagement have been carried out around the Care Act, changes to musculoskeletal services, the mental health strategy, and the Right First Time Programme. The Health and Wellbeing Board seeks to feed into these other engagement mechanisms where appropriate and is only part of the wider engagement picture in Sheffield.
- Over the period April-September 2014, the Board has been clarifying its relationship with a range of **partnership boards** which existed under the old health and wellbeing partnership (before the statutory Health and Wellbeing Board was created). While the Board recognises the important relationship these groups have, it does not have a

⁸ See <https://www.youtube.com/user/SheffHWB>.

formal relationship with any of them, and instead invites them to engage with the Board through the mechanisms listed above.

- Board members have engaged **regionally** with other Health and Wellbeing Boards as appropriate to share best practice and learning.
- Officers supporting the Board have recently been involved in creating **national guidance** for the use of social media by Health and Wellbeing Boards.

4 RECOMMENDATIONS FOR THE HEALTH AND WELLBEING BOARD

It is recommended that the Health and Wellbeing Board focus its engagement from October 2014-March 2015 on the following areas:

4.1 Engaging with citizens, service users and patients

It is recommended that:

- An engagement event be held in October 2014 focusing on children and young people.
- Places for engagement events be restricted for providers and practitioners to ensure the voice of citizens, service users and patients is heard.
- One or more Board members put themselves forward to be videoed about their vision for the Health and Wellbeing Board.
- Places such as The Circle, Town Hall and local libraries are replenished with summary copies of the Joint Health and Wellbeing Strategy.
- NHS England's representative on the Board clarifies NHS England's approach to public engagement and assures the Board that it will involve the Board in its engagement.
- Healthwatch Sheffield informs the Board's review of outcomes 2, 4 and 5 of the Joint Health and Wellbeing Strategy.

4.2 Engaging with providers and businesses

It is recommended that:

- The Health and Wellbeing Board considers how it can follow up the July meeting it had with businesses that work in healthcare technologies.
- The Health and Wellbeing Board holds an engagement event with the growing Provider Assembly in January 2015.

4.3 General

It is recommended that:

- The Board receives a similar summary to this in March 2015.

5 REASONS FOR THE RECOMMENDATIONS

It is important that the Health and Wellbeing Board continues to be transparent and accessible in its decision-making.