

## HEALTH & WELL-BEING BOARD

OCTOBER 2007

### Governance and Accountability Framework

#### 1 Purpose of Report

The purpose of the report is to set out the requirements for Health and Social Care to achieve appropriate governance and accountability in the commissioning and provision of services and a proposed framework to achieve this. The development of this framework will ensure transparency and fairness in service development and an accountability process. It will also facilitate improved integration and effective partnerships between the PCT and practice based commissioners to promote innovation.

This report should be read in conjunction with the report to the Children and Young People's Partnership Executive (The Changing For Children Board) which sets out the governance arrangements for Oldham's Children's Trust approach.

#### 2 Recommendations

It is recommended that:

- the Health & Well-Being Board give in principle approval to the proposed principles and framework for accountability;
- a further paper on the information requirements to support effective commissioning be presented to a future board.

#### 3 Background

Improving commissioning is one element of a comprehensive health and social care reform programme which will ensure better care, better patient /service user experience and better value for money. Improving joint commissioning arrangements between the PCT and the Local Authority will ensure that we take a holistic view of our local population's needs for both health and social care services out of hospital and that we continue to drive the progress on integrated services.

A number of recent key documents, including the Commissioning Framework for Health and Wellbeing, Guidance on establishing Children's Trust arrangements and the latest Operating Framework for the NHS identify effective joint commissioning as being critical to the delivery of locally defined services.

Other key drivers such as the National Children's Plan – 'Building Brighter Future's', the White Paper, 'Our Health Our Care Our Say' clearly define the direction in relation to the commissioning agenda and the requirement upon the Director of Adult Social Services, in conjunction with the Director of Children's Services and the Director of Public Health to carry out a comprehensive joint strategic needs

assessment in their communities helps to underpin the evidence base essential to the delivery of appropriate commissioning activity and subsequent service delivery. The local Health and Well-Being Strategy recognises the important role effective joint commissioning has to play in ensuring the improvement in the health and well-being of communities and individuals in Oldham.

Whilst there are clear drivers to ensure that key agencies effectively operate together it also has to be recognised that there will continue to be the need for single organisation commissioning which reflects the nature of the activities of the organisations involved; the PCT is required to produce an Annual Prospectus setting out plans and priorities for commissioning. The Local Authority is also required to identify its specific commissioning intentions through local plans. The new arrangements in relation to the Local Area Agreement will also begin to influence commissioning arrangements over a period of time. Integral to all the above arrangements will be the involvement of local people in priority setting, service planning and review.

Practice based commissioning is a key element of the health reforms and will be critical in enabling us to achieve best value for patients. Practice based commissioners, the PCT and the Local Authority will need to work together to ensure that the commissioning process delivers a comprehensive and equitable range of services.

Within the local authority there will be an increasing emphasis on locality based service delivery and, over time, a shift towards locality based operational commissioning.

### **Proposed Framework for Governance and Accountability**

The establishment of a Health & Well-Being Board was agreed in October and its initial membership is set out in Appendix A.

During the next phase, the Board will be responsible for developing and monitoring commissioning strategies, oversight of the change management and service review programmes and decision making **in respect of joint commissioning plans and proposals.**

The Board will be responsible to the Local Authority's Cabinet and to the PCT Board in terms of governance of decision making on use of joint resources and will need to engage with the public, patients and other key parties, in particular, the Overview and Scrutiny committee in ratifying its joint commissioning plans. Terms of reference and proposed membership are attached as Appendix A of this report. A chart outlining the reporting structure of the board is attached at Appendix B of this report.

### **4.1 Outcomes of improved health & wellbeing**

The key outcomes of improved health and wellbeing might be summarised as:

- Improved health outcomes, reducing inequalities, promoting inclusion and improving access to community services.
- A mix of health and social care services, in and out of hospital, that provide choice and are appropriate to the scale and nature of the needs of the local community and within available resources.
- Better prevention services with earlier intervention to promote greater independence.

- Improved support for people with disabilities and long-term conditions to enable them to manage their own care.
- To ensure services are person centred and enable the individual to exercise choice and control.
- Engagement from patients, service users, the public and other key parties including, in particular, overview and scrutiny committees and the wider local authority, the voluntary sector and where appropriate the private sector.
- Services that comply with core standards and are improving in line with developmental standards as monitored by the Health Care Commission and the Commission for Social Care Inspection.
- Value for money for the taxpayer.

#### **4.2 Principles for effective commissioning**

In order for the Board to function effectively in the joint commissioning of health and well-being in Oldham, it is proposed that it agrees a set of principles to guide its operation. These can be summarised under the following headings:

- Collaboration
- Devolution
- Accountability
- Transparency
- Information

**Collaboration** – While retaining their existing remit and accountability, different parts of the system will need to collaborate to ensure the commissioning and provision of a comprehensive and equitable range of high-quality, responsive and efficient services, within allocated resources. They will need to strive to overcome the inherent tensions in the system to ensure improved outcomes for local people.

**Devolution** – Decision making should be as close to the patient/service user as possible.

**Accountability** – All parts of the health and social care system are expected to conform to the highest standards of honesty, integrity and probity and to work together in partnership in a people centred, inclusive way. There is also an expectation that all parts of the system will play their full part in achieving core standards and meeting national priorities and objectives. All parts of the system will have the responsibility to ensure that they provide and commission care of the highest standards within available resources. All commissioners will be responsible for achieving best value within their budgets and delivering their commissioning plans.

**Transparency** - Any potential conflict of interest between being both a commissioner and a provider will need to be addressed by all parties to the board and declarations of interest logged before decisions are made. The Chair of the Board will need to consider whether the declaration of interest should preclude that person from participating in the discussion on an issue or whether it is sufficient for that person to refrain from any decision making.

These declarations and the Chair's decision will be recorded to ensure transparency and an audit trail.

The remit of the Board will specifically exclude decisions about how and from whom services should be procured.

## Appendix A

### Terms of Reference

#### Health & Well-Being . Board

a) Vision – Making Lives Better Together

b) Principles for the Health & Well-Being Board

- We will commission excellent standards of service, which will deliver improved outcomes for all communities and individuals
- We will provide services, which are person centred and reflect the needs of carers
- We will reflect all Ages
- We will ensure the engagement of the public in decision making
- We will have a Unified Approach
- We will agree a Common Language
- We will agree Accountability arrangements
- We will be supported by an appropriate level of administration

c) Terms of Reference

- Provide Leadership and Strategic Direction for our joint work
- To manage the development of an overarching joint commissioning strategy for Health and Social Care
- To programme manage the delivery of the joint commissioning strategy including benefits realisation, stakeholder management and communication, resource allocation, quality management, risk management and issue resolution
- To approve joint commissioning strategies for Older People's Services, Adult's Services and Children, Young People and Families' Services (in conjunction with the Children and Young People's Strategic Partnership)
- To contribute to priority setting for the LAA Health & Wellbeing 'programme'
- To ensure the Joint Strategic Needs Assessment is annually refreshed and reviewed every 3 years to ensure there is a firm foundation provided for commissioning decisions and investment

**Plus ...**

- Pursue ongoing opportunities for integration
- Horizon scan
- Ensure effective representation of Key Stakeholders
- Ensure future proofing of provided services

Promote health and wellbeing for all

**d) Membership**

PCT Board Members  
2 Non – Executive Directors

Local Authority Cabinet Members  
2 Councillors – Children  
Adults

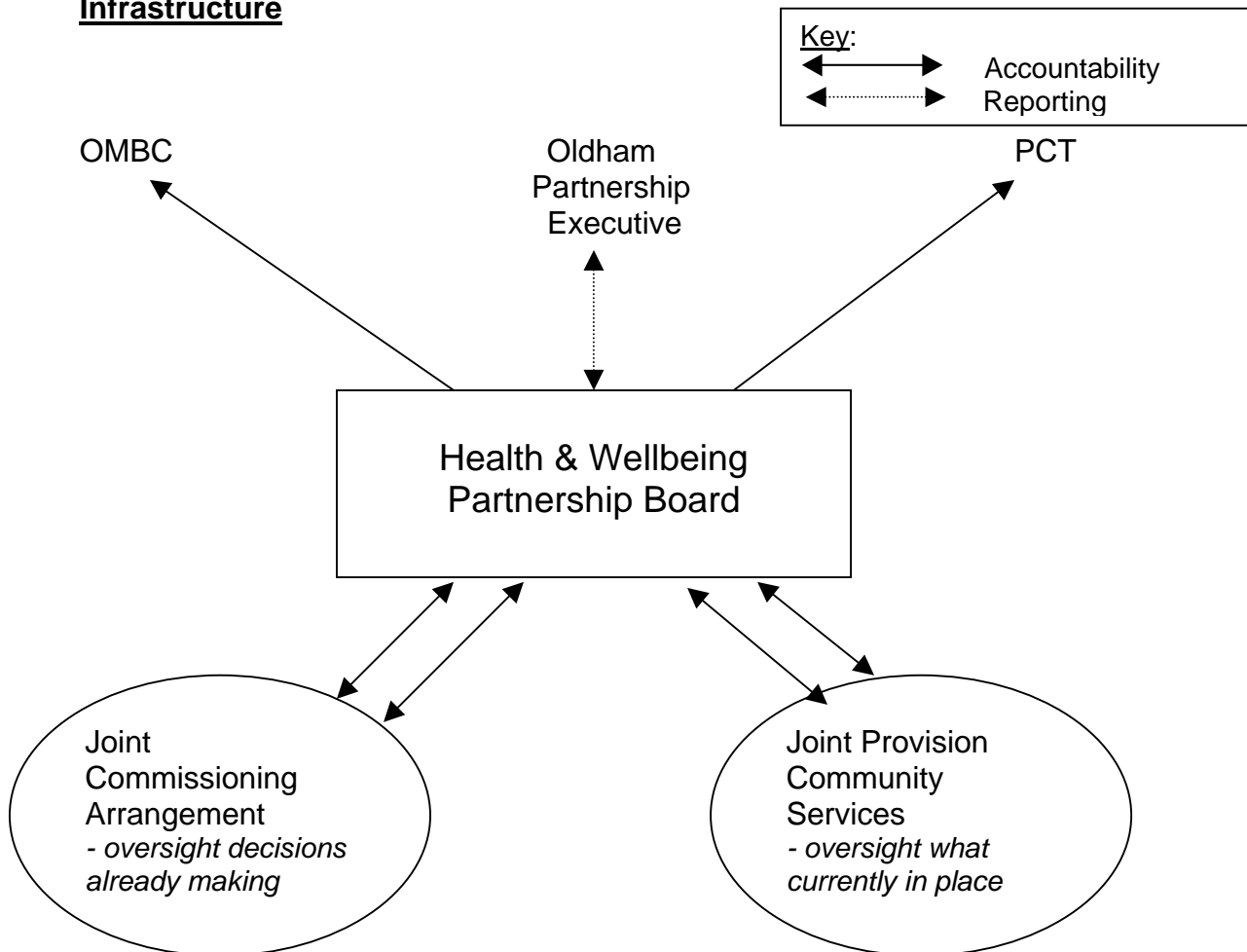
2 Executive Directors

2 Executive Directors

The Core Group may total 8 with co-opted members and administrative support.

Appendix B

**Infrastructure**



**Suggested focus**

LAA  
 Drug & Alcohol  
 (CAMHS)  
 Continuing Health Care / long term  
 : voluntary sector  
 : intermediate care

**Suggested focus**

Stroke pathway  
 Dementia