Shaping the landscape of health and care integration: Governance, the Haringey Borough Partnership and the Community Health and Care Advisory Board

1. Introduction

This brief note builds on the work already done to establish appropriate governance for the Borough Partnership as part of the Health and Wellbeing Board, within the wider context of the North Central London Integrated Care System (ICS) and recognising the significant impacts of the Covid-19 pandemic and its aftermath.

Here, we specifically focus on plans to set in place a Community Health and Care Advisory Board to support the work of the Health and Wellbeing Board Borough Partnership.

2. Background

Local partners have now agreed structures which align the Borough Partnership with the Health and Wellbeing Board to ensure a focus on both Strategy and Delivery to improve population health and wellbeing. In setting up the new arrangements, we have been mindful of the wider work to create the North Central London CCG and Integrated Care System across the same footprint during this financial year.

The Covid-19 pandemic, the subsequent lockdown and restrictions and the levels of demand for acute care capacity had an immediate and profound impact on these arrangements. The strength of the existing partnerships has been evidenced by the continued focus on collaboration and joint working and the sustained ambition to work together more in the future. As we move into the next phases of responding to the pandemic, the Borough Partnership has emerged as a critical focal point of local work to deliver improved health outcomes, which link into wider pieces of work on the economy, housing, community and civil society.

We know there are some new and specific roles for the local system which have arisen from Covid-19, such as overseeing local outbreaks, linking to testing and contact tracing and a renewed focus on a sustainable adult social care system which now form part of the wider governance. All of these rely on effective community engagement and leadership to have the maximum impact on reducing community transmission and preventing further harm to local health and wellbeing.

We know too that a number of local health and care services have operated very differently over the past few months. Some of the changes happened very rapidly and without the levels of engagement and consultation usually required – and there is understandable apprehensiveness across communities that this may reflect a normal way of working for the future.

In light of these concerns and the wider environment in which the health and care system is operating, this paper puts further detail on the proposal for a Community Health and Care Advisory Board to strengthen community engagement and involvement in decision making about health and wellbeing in the borough. Senior representatives of the CCG (Haringey Directorate Commissioning and Communication), Public Voice and Haringey Council recently met to discuss how to take forward this work and are making the proposal set out below for initial feedback.

3. Proposal

As already agreed, the Health and Wellbeing Borough Partnership Board, the HWBP Board, remains the focal point for strategic oversight, development and decision making with relation to health and wellbeing going forward. It is a key focal point too of transparency, accountability and involvement for local residents meeting as it does in public and as a sub-committee of the local authority.

The HWBP Board remains responsible for the production and delivery of the Health and Wellbeing Strategy as well as for liaison across the system in Haringey and with partners across North Central London and notably as part of developing the Integrated Care System.

It is recognised that the HWBP Board has only the delegated powers of its membership and that some decisions will need, therefore, to be referred to the Cabinet (for the Council) and to the NCL Clinical Commissioning Group and individual Trust Boards (for the NHS) as appropriate.

Whilst there may be other Groups that directly support the HWBP Board, this paper focuses on the Community Health and Care Advisory Board, which at a high level has already been agreed to ensure a wide pool of community voices are heard directly by the HWBP Board.

Community Health and Care Advisory Board

The overarching purpose of the Community Health and Care Advisory Board (CHAB) is to take a community leadership role with regard to engagement, co-production, the development of the Community Impact Assessment/Equality Impact Assessments and the production of the JSNA for example. It will be a key conduit for community voices and perspectives into the HWBP Board — and would ensure that proposals coming forward to the Board for approval are where possible co-produced and at the least are cognisant and reflective of community views.

By way of background, there are already a number of structures in place for community, resident and patient engagement and participation across health, care and wider wellbeing. These include, but are not limited to, the Joint Partnership Board and Reference Groups, the Haringey Patient Engagement Network, the Adult Social Care Redesign Group, Disability Action Haringey, the Parent Carer Forums and the Patient Involvement Forums run by individual NHS Trusts. There are also a number of health and wellbeing focused organisations which interact effectively with users and residents, these would include Mind in Haringey, Markfield and Kith and Kids for example. There are organisations which lobby and campaign on health and wellbeing issues such as Haringey Keep Our NHS Public and then there is HealthWatch which has a clear remit to act as the quasi community regulator for health and care delivery. Each has a different reach and purpose, although there is some cross-over of membership and of approach. It is not quite clear which proposals, papers, ideas and plans are taken through which Forum, at what stage of evolution, with what expectations and with what impact – and there are some opportunities to try to address this lack of a consistent approach.

The proposal is for leads (either the Chairs or nominated individuals) from each of these groups to form the Community Health and Care Advisory Board (CHACAB), with a direct link into the HWBP Board. We see this link being created by 2 nominated community members of the CHACAB sitting as non-voting members of the HWBP Board. So we would see a mix of views from those who might identify primarily as residents, patients, users, carers, campaigners, activists, experts by experience. Whilst we would seek to adopt an inclusive approach, it would be useful to have consistency of core membership at least. In addition, it is intended that senior officers of both the Council and the CCG would attend each meeting of the Board with engagement leads from the Trusts also attending for specific items.

The Community Health and Care Advisory Board would not seek to replace existing groups/meetings/structures/forums – unless they themselves agree that this is the right thing to do.

We would propose the Community Health and Care Advisory Board would:

- Be a forum for different perspectives and views to come together and be heard on the wider health and wellbeing system
- Ensure that community views are listened to and considered fully by those shaping and delivery the wider health and care system – both at the start and at the end of any process of redesign, transformation or change
- Offer support to enhance all opportunities for co-production and community engagement for the wider health and care system even to deliver business as usual
- Build some consistency about the pathways for consultation, engagement and coproduction where new proposals are moving through the system, even those being taken forward in haste (e.g. due to the pandemic)
- Consider proposals to consolidate our engagement endeavours across the wider partnership
- Contribute to the development of the Forward Plan for the HWBP Board in order to understand where it can have maximum impact, to enable formative discussion and to facilitate evaluative review
- Have sight of the agenda for the HWBP Board in a timely fashion in order to contribute effectively to consideration of items
- Take forward pieces of work already in progress including the finalisation of the Co-Design Charter for the Borough Partnership and the requirement for all HWBP Board papers to include consideration of co-production and engagement as standard

There are some aligned areas which we see as requiring more consideration and work through the wider Borough Partnership, including a streamlined communications approach for the Borough Partnership, and which we are not intending to take forward at this time.

4. Next steps

If this proposal is agreed in principle, there are some things we feel are necessary in order to make this happen:

- a. formal endorsement of, and agreement to, the proposal at the Health and Wellbeing Borough Partnership Board and at the various forums which would be invited to participate
- b. commitment by partners of some administrative resource to support the CHACAB, given the complexity of keeping track of proposals, building reliability and co-production
- c. appointment of a Chair it is suggested that the Chair of the HWBP Board would also act as Chair of the CHACAB, at least in the short term.
- d. allow for a period to test out the pathways for communication and engagement which we would seek to use given the range of groups feeding into the CHACAB
- e. establish a first meeting to talk through the above inviting representatives from each of the groups highlighted above

5. Conclusion

This paper sets out proposals for a new community engagement forum with a focus on Health and Wellbeing and to ensure community voices are listened to and taken into account in strategic planning and delivery across the health and care landscape. The Community Health and Care Advisory Board will develop alongside the Health and Wellbeing Borough Partnership Board and will act as a key partner in embedding co-production and community engagement.