

Haringey Health and Wellbeing Board: review of strengths and areas for future development in context of Neighbourhood Health



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What is in these slides



The next 4 slides outline some of the additional expectations on Health and Wellbeing Board Partnerships to support and oversee the development of Neighbourhood systems of Health and Care at borough (place level). These expectations link to the recent NHS Neighbourhood Framework published in March 2026.

The final 4 slides outline the process and findings of a recent Local Government Association (LGA) and Department of Health and Social Care (DHSC) support offer to review the strengths and areas for development of Haringey's Health and Wellbeing Board as we prepare for these additional expectations.

Enhanced role of the Health and Wellbeing Board Partnership overseeing Neighbourhood Health



Planning

Must Dos	Description of the Ask	Timeframe in Framework
Lead development of the neighbourhood health plan	HWBs must jointly lead and approve a locally owned neighbourhood health plan with ICBs and partners.	Plan developed during 2026-27 Implementation from 2027-28 financial year.
Define neighbourhood outcomes & metrics	HWBs must ensure that these are developed with partners and communities to set local outcomes covering the whole life course.	During 2026-27 as part of developing plans for 2027-28.
Agree neighbourhood geographies ("footprints")	HWBs must ensure that geographies are set for INTs and neighbourhood planning (aligned with natural communities).	By end of 2026-27 (listed as a "minimum basic requirement").
Embed community engagement and co-design	HWBs must ensure neighbourhood plans are co-designed with communities.	Throughout 2026-27 and 2027-28 planning period.



INT/ pathway development

Must Dos	Description of the Ask	Timeframe in Framework
Oversee development of Integrated Neighbourhood Teams (INTs)	HWBs must ensure that plans are agreed to establish INTs for frailty, end-of-life, multiple LTCs and CYP.	Plans required in 2026-27 as part of minimum requirements; full alignment by 2027-28.
Start planning new neighbourhood elective pathways	HWBs must drive system participation in designing devolved outpatient commissioning and new referral pathways.	During 2026-27 (minimum requirement).
Support INT rollout for cancer, frailty, LTCs and CYP	HWBs must help ensure INTs focus on national priority cohorts.	Initial setup 2026-27, with expanding coverage to 2028-29.



System improvement and alignment

Must Dos	Description of the Ask	Timeframe in Framework
Agree plans to reduce non-elective admissions & bed days	HWBs must be supportive to ICBs in shifting activity into urgent, reablement and community services.	Initial plan required in 2026-27.
Agree plans to improve GP access	HWBs must support partners to meet GP core hours, urgent access standards - by highlighting issues raised by citizens to reduce variation.	Plans in 2026-27 with trajectories building through 2027-29.
Confirm approach to 18-week community waits and eliminating 52-week waits	HWBs must ensure system plans are in place to meet community wait standards.	Plans confirmed during 2026-27; outcomes expected by 2027-29.
Align neighbourhood plans with wider public service reforms	HWBs must ensure integration of Best Start, SEND reforms, Pride in Place, Family Hubs, employment & housing programmes.	Throughout 2026-27 planning phase and included in final 2027-28 neighbourhood plan.



Foundations for implementation

Must Dos	Description of the Ask	Timeframe in Framework
Confirm use of pooled funding under BCF	HWBs must influence how BCF will be used to support neighbourhood health in line with national BCF guidance.	During 2026-27 as part of minimum requirements.
Ensure data-sharing arrangements are in place	HWBs must ensure partners have data-sharing arrangements enabling patient identification and evaluation.	Plans confirmed during 2026-27.
Confirm organisational ownership and governance model	HWBs must receive assurance of who is responsible for each part of delivery, including governance and partnership arrangements.	Finalised for the 2027-28 plan, with preparatory work during 2026-27.
Incorporate neighbourhood plan into ICB 5-year commissioning plan	Once agreed, the neighbourhood plan must be absorbed into the ICB's refreshed commissioning plan.	During 2027-28.

Haringey Health & Wellbeing Board Support Review



The Health and Wellbeing Board engaged in a recent Local Government Association (LGA) and Department of Health and Social Care (DHSC) support offer, helping to strengthen system readiness for the Neighbourhood Health model.

The Board received one to one support from Health Integration Partners including

- Completing a Conditions of Success (CoS) survey with core members of the Health and Wellbeing Board and Borough Partnership Executive.
- National webinars to understand best practice and reflect on implications locally.
- Co-ordinating a series of deep dive one to one interviews with Board members
- A facilitated session with core members of the Health and Wellbeing Board to discuss findings of our self-assessment

Their key findings are a synthesis of engagement, survey feedback and learning from other systems to support Haringey HWB in readiness for Neighbourhood Health Planning.

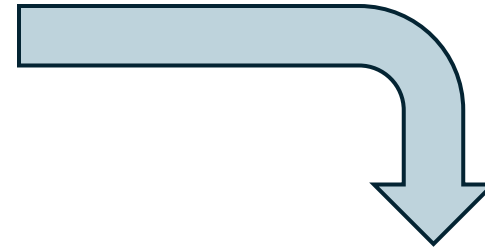
What's working well?

Haringey's Strategic Direction

- Health and Wellbeing Strategy
- Neighbourhood Integrator Model and Assurance
- Neighbourhood Working and Place-Based Planning Materials

On review of the above documents, Haringey demonstrates a clear focus on:

1. **Prevention and Health Inequalities:** A strong emphasis on tackling health inequalities through prevention, with a clear focus on addressing the social gradient and improving outcomes for underserved communities.
2. **Community-Centred and Co-Produced Approaches:** Embedding community voice, co-production and resident engagement as central to neighbourhood working and service design.
3. **Neighbourhood and Integrated Care:** Developing neighbourhood models through integrator approaches, bringing together health, care, VCSE and wider partners to deliver coordinated, place-based support.
4. **Wider Determinants of Health:** Recognising the critical role of housing, employment, environment and community assets in improving population health and reducing inequalities.
5. **System Integration and Partnership Working:** Strengthening collaboration across the borough partnership, with a focus on aligning organisations, resources and delivery around shared priorities.



Health Integration Partners
recommendations are set out overleaf.

Note that their recommendations are for the system as a whole, not just the board members, acknowledging that:

- HWBs are not the delivery lead – they are the strategic, convening, and assurance body
- Delivery of the Neighbourhood Health Framework is described in the guidance as ICB led, working through place-based partnerships. It is critical that Neighbourhoods do not take a 'health' only approach and form a true partnership between health, social care and wider partners.

Recommendations - What Does Good Look Like?

Priority	Influence of the Citizen Voice	VCFSE Representation/Influence	Shared Agenda With Outcomes
Objective	Embed lived experience as a core driver of decision-making and service design.	Position VCFSE as a core partner in design, delivery and decision-making.	Establish a clear, co-owned shared agenda that translates into measurable neighbourhood outcomes.
What Good Looks Like	<ul style="list-style-type: none"> ✓ Bring chairs of existing engagement groups into HWB, with structured onboarding and coaching ✓ Introduce a mandatory requirement: all Board papers include lived experience ✓ Establish either/both: <ul style="list-style-type: none"> • Cohort-based advisory groups (e.g. CYP) • Neighbourhood steering groups (citizens + VCFSE) ✓ Create a system-wide feedback loop ("you said, we did") ✓ Develop cascade communication mechanisms across neighbourhoods ✓ Improve inclusivity and access (translation, digital tools, outreach) ✓ Launch monthly "walk the neighbourhood" leadership engagement ✓ Build staff capability in co-production methods and facilitation 	<ul style="list-style-type: none"> ✓ Identify and align sustainable resource (incl. BCF opportunities) ✓ Create clear routes into decision-making (not consultation) ✓ Align VCFSE leads with clinical leads to start building the Neighbourhood infrastructure ✓ Formalise Haringey VCFSE Alliance with agreed ToR and governance link to HWB ✓ Ensure representation from all neighbourhoods/diverse communities ✓ Define the alliance's role in: <ul style="list-style-type: none"> • Strategy input • Co-design • Delivery support ✓ Launch a capacity-building programme for VCSE partners ✓ Implement a rotating/democratic representation model 	<ul style="list-style-type: none"> ✓ Develop a co-produced "Haringey Health Manifesto" (system + VCSE + residents) ✓ Agree 3-5 system-wide priorities aligned to the HWB Strategy and neighbourhood model ✓ Define a clear outcomes framework for each priority (with neighbourhood-level metrics) ✓ Map and implement the golden thread: HWB → Borough Partnership Exec → neighbourhood delivery ✓ Introduce quarterly outcome tracking at HWB, focused on impact not updates ✓ Establish a shared system baseline (data, insight, resource mapping)
Milestones	<ul style="list-style-type: none"> • Priorities + manifesto agreed • Outcomes framework + baseline complete • Reporting and refinement embedded 	<ul style="list-style-type: none"> • Representation as partner embedded • Alliance formalised + ToR agreed • Governance embedded • Full participation in priority delivery 	<ul style="list-style-type: none"> • Priorities + manifesto agreed • Outcomes framework + baseline complete • Reporting and refinement embedded

What we are going to do next

The integrator organisations are developing a plan for the next 12 months on behalf of our wider partnership which will outline priorities for our Neighbourhoods Work in Haringey

This will include how we are going to address the priority recommendations set out in the previous slide. Our approach includes the following.

- We are developing a proposal for a community advisory forum which will provide a space for community and resident voice to input into the development of our Neighbourhood and Place based work on health and care
- Alongside this the role and membership of the Health and Wellbeing Board will need to be reviewed to ensure it is well placed to deliver the expected level of oversight of our local plans as set out in the NHS Neighbourhoods Framework
- We are looking at ways we can develop a co-ordinated voluntary sector infrastructure that is organised at Neighbourhood level
- We are reviewing and refreshing the initial 18-24 month action plan that is our mechanism for delivering the Haringey Health and Wellbeing Strategy 2024-29

Further updates on the above areas will be taken to upcoming Health and Wellbeing Boards