Rotherham Health and Wellbeing Board Work Programme - Year 1 (October 2011 – September 2012)

No.	Key Action	Lead Agency / Lead Officer	Completion Date	Excellence Plan Ref.
1	Agree Terms of Reference, Roles and Responsibility of the Board		Complete December 2011	1.1, 1.2, 1.3, 1.4, 4.1 and 6.1
2	Hold a Health Summit to define priorities for all stakeholders		Complete December 2011	1.5
3	Undertake a review of HWBB pilots and feed learning into Board work programme and improvement plan	Kate Green	February 2012	4.2
4	Agree the Joint Strategic Needs Assessment	Chrissy Wright	March 2012	2.3
5	Agree HWBB Priorities across all stakeholders	Tom Cray	April 2012	1.2, 1.3, 1.5, 1.6 and 2.4
6	Put in place a Joint Commissioning Model	Chrissy Wright/ Sarah Whittle	May 2012	2.5
7	Develop a Performance Management Framework based on the outcomes framework and the priorities of the board	Dave Roddis	April 2012	5.1, 5.2 and 5.3
8	Publish Rotherham's Health and Wellbeing Strategy	Matt Gladstone	May 2012	1,8, 2.1, 2.2, 2.4 and 2.6
9	Complete a review of health complaints ahead of the transition	Dave Roddis/Sarah Whittle	June 2012	5.5
10	Develop effective HealthWatch arrangements in Rotherham	Zafar Saleem	September 2012	4.7

Rotherham Health and Wellbeing Board - Board Development Excellence Plan						
	Early Progress	Results	Maturity	Exemplar		
	Jan 12 – Mar 12	Apr 12 – June 12	Jul 12 – Sept 12	Oct 11 – Dec 12		

1. F	1. PURPOSE AND VISION				
No.	Key Action	Who?	Timeline		
1	Agree purpose of the Board	COMPLETE	October 11		
2.	Publish values and board priorities to public and in key stakeholder documents	COMPLETE	November 11		
3.	Ensure all HWBB members understand the boards role	COMPLETE	December 11		
4.	Hold a Health Summit to identify priorities with all stakeholders.	COMPLETE	December 11		
5.	Agree values, board priorities and work programme	COMPLETE	January 2012		
6.	Agree priorities and stretch goals with all stakeholders	Matt Gladstone	April 12		
7.	Agree ethical values combined with a robust mechanism for adding and removing services and/or care settings against these	Shona McFarlane	April 12		
8.	Ensure all plans are rooted in local population needs (Public Health Annual Report)	John Radford	April 12		
9.	Undertake public engagement and public accountability testing on purpose and vision	Zafar Saleem	June 12		
10.	Ensure the work of relevant existing local partnership groups eg. The Local Strategic Partnership has been considered	Carole Haywood	June 12		
11.	Hold an annual HWBB debate on organisational purpose, and how in-year achievements or issues impact on this.	Tom Cray	August 12		

Purpose & Vision - Annual Self Assessment

1	Ensure we systematically match how purpose dovetails with population needs		
2.	Demonstrate we are achieving our purpose and vision as we are benefiting population health in accordance with our		
	plans		
3.	Influence both local health and local authority commissioners		

2. 8	2. STRATEGY				
No.	Key Action	Who?	Timeline		
1	Undertake a review of all relevant strategies	Kate Green	April 2012		
2	Set out a timetable for developing HWB Strategy	Kate Green	Complete		
3	Agree the Joint Strategic Needs Assessment and make sure the JSNA is the base for all strategic decisions	Chrissy Wright	March 2012		
4.	Ensure the HWBB Strategy is underway	Kate Green	February 12		
5.	Put in place a joint commissioning model and an agreement is in place for areas of joint commissioning.	Chrissy Wright	April 12		
6.	Publish the HWB Strategy, which includes improvement milestones and how these will be measured	Matt Gladstone	April 12		
7.	Put in place a framework for ensuring the HWBB strategy has been reviewed and refined in the light of successful achievement of milestones, and new intelligence and aspirations	Tom Cray	September 12		

Strategy - Annual Self Assessment

1. The HWBB strategy has benefited other healthcare economies to our own, as well as influencing the strategic direction of all local partner organisation

No.	Key Action	Who?	Timeline
1	Communicate the leadership of the HWBB and their contact details to key stakeholders	Tracy Holmes / Helen Watts	January 2012
2	Identify relevant stakeholders and invite to participate	COMPLETE	January 2012
3.	Make sure Leadership development for HWBB discussed and agreed and development plans initiated	COMPLETE	February 12
4.	All stakeholders understand leadership issues for HWBB	Shona McFarlane	March 12
5.	Relevant stakeholders regularly attend and provide input into work programme	Matt Gladstone	March 12
6.	Results of partnership working systematically reviewed by HWBB.	Matt Gladstone	April 12
7.	Public health voice is evident in commissioning and contracting decisions	John Radford	June 12
8.	Make sure ongoing succession plans are in place	Matt Gladstone	September 12

Leadership of the Local Healthcare Economy – Annual Self Assessment

1	Make sure that local health and social care resources are understood
2.	Evidence that relationships with CCG's are positive and there is ongoing dialogue about commissioning and contracting decisions
3.	Review success of leadership approach.
4.	Demonstrate benefits of partnership working have enabled the majority of stakeholders to meet their improvement trajectories and resource allocation
5.	Demonstrate benefits of partnership working have enabled the majority of stakeholders to exceed their improvement trajectories.
6,	Outcomes have been improved and this is traceable back to initiatives from the HWBB

4. GOVERNANCE

	304 ERNANCE		
No.	Key Action	Who?	Timeline
1	Membership and terms of reference for the HWBB have been drafted, shared and are fully agreed	COMPLETE	December 11
2	Examine the work of the pilot HWBB's to inform how we work	Kate Green	Complete
3	The HWBB has been fully set up and first annual cycle of business agreed.	Tom Cray/Chris Edwards	January 12
4.	Develop effective HealthWatch arrangements in Rotherham and make sure that they are embedded into the HWBB governance.	Zafar Saleem	September 12

Governance – Annual Self Assessment

1.	Good governance benefits to HWBB identified and we know how our better governance practice has influenced local partner organisation.
2.	Develop relationships with relevant local organisations
3.	Local stakeholders have clearly incorporated HWBB accountabilities into their own governance arrangements.
4.	Carry out a structured annual review of the HWBB and make improvements to structure and organisation

No.	Key Action	Who?	Timeline
1	Identify information requirements and agree format for initial performance management framework.	COMPLETE	January 2012
2	A dashboard of key information and performance management framework has been developed based on the outcomes framework and priorities and discussions on how to improve our information are underway.	Dave Roddis	March 12
3	KPI's reflect shared performance objectives across health and social care	Dave Roddis	April 12
4.	The HWBB has current published strategy, which includes improvement milestones and how these will be measured	Dave Roddis	May12
5,	Complete a review of health complaints to ensure that customer experience is captured and feeds into the HWBB	Dave Roddis	June 12

Information and Intelligence – Annual Self Assessment

1.	HWBB informed by real-time intelligence, demonstrating improved outcomes, quality and efficiency across health
	and social care
2.	Outcomes and performance benchmark against the best performers

6. E	6. EXPERTISE AND SKILLS				
No.	Key Action	Who?	Timeline		
1	Skills and expertise for HWBB members have been identified and agreed	Tom Cray/ Chris Edwards	March 2012		
2	Induction and development plans for the HWBB are up and running	Tom Cray/ Chris Edwards	March 2012		

Expertise and Skills – Annual Self Assessment

1		HWBB influencing skills are evident by success in positive change to local contracts and the pattern of local provision.
2	-	The HWBB supports CCG's and local authority by valuing key commissioning skills.
3	-	The HWBB acts as a forum to bring specialist skills and expertise to support commissioning e.g. clinical advice from local providers
4	•	The HWBB is influencing the organisation development of partner organisations.
5	-	The local health and social care economy is recognised as being a good career choice for commissioning professionals.