

## **Report to Health and Wellbeing Board**

**20 October 2014**

### **How will the Health and Wellbeing Board tackle the ‘wicked issues’?**

#### **1. Purpose**

Following discussion with the new chair of Walsall Health and Wellbeing Board, this paper is brought to the Board to establish how members might:

1. identify Walsall's most complex, intractable health and wellbeing issues
2. agree a new action centred approach to tackling them

Each of the 19 HWS priorities has a number of measures set against it to show performance in Walsall. These measures enable the HWB to:

- have an overview of current progress against the 19 HWS priorities
- easily identify where adequate progress is not being made
- assure itself that adequate steps are being undertaken to overcome the challenges and begin to reverse poor performance.

Where measures are showing poor performance over a period of time, the HWB recognises that the issues they represent are usually both complex and intractable and generally affect a number of partners. HWB members know we need to do things differently if we want to make a difference and reduce the adverse impacts felt by all stakeholders. The issue is how to decide which of the poorest performing issues the HWB should focus on first – which of them are the agreed ‘wicked issues’ and what more could the HWB do about them?

#### **2. Recommendations:**

- 2.1 That the Health and Wellbeing Board agrees which issues it wishes to focus on and in what order of priority
- 2.2 That the Health and Wellbeing Board identifies a champion (or champions) from the Board members for each ‘wicked issue’ and agrees the approach to tackling them.

### 3. Report detail

#### Identification of the 'wicked Issues':

The following are all characteristics that can indicate both the complexity and intransigence of issues:

- performance measures/outcomes that are red in the performance dashboard and have been red for some time
- the issue is a significant contributor to death, disability or service cost and use across the borough
- the issue affects a number of services within the Council and NHS as well as other partners
- the issue is recognised by partners as needing to be tackled urgently with a corresponding ability to reshape services locally

*(These characteristics correspond with those within the decision tree used to identify issues for the JSNA – see page 11 of JSNA)*

#### Does the HWB already know about issues that reflect these characteristics?

There are a number of issues that have already been identified in the JSNA or raised by members of the HWB and which share all the characteristics described above. These include issues such as:

- Infant mortality
- Obesity
- Individuals who are on incapacity benefit and employment support allowance due to health related issues
- Complex health and social care needs in older people creating high levels of demand on the hospital and social services

#### What is the way forward for the HWB?

The HWB needs to take action to consider these issues afresh and in such a way that stakeholders can jointly make a difference and reduce the adverse impacts felt by all.

The purpose of the initiative is to look at the issue to find out:

- What is working and what isn't?
- How effective are our current plans and delivery arrangements?
- What are the barriers to progress in this area?
- How we can do more of what is making a difference?
- What gaps can we identify?
- What other evidence based good practice do we know about?

The proposal is that the HWB should take the issues it wishes to focus on and for each issue appoint a champion (or a number of champions) from amongst the HWB members who will:

- provide leadership and co-ordination around this issue
- oversee development of a plan for joint action – to be brought back to the HWB for agreement, approval and action.

The role of the champion will be to pull together resources from across the partnership to analyse data, actively assess evidence and produce the action plan.

The action plan will show how the HWB will engage with wider stakeholders to look afresh at the identified issue and suggest new ways of working. Should members wish to bring stakeholders together, this may well require an organised event, but there are a wide variety of methods that could be used to create the right environment for creative, innovative thinking.

The action plan will also need to ensure members access the evidence/ learning/ guidance that is already available, (eg: NICE guidelines, local and national networks, visits to areas where good practice has been identified) and identify a process to incorporate this into future commissioning proposals and the JSNA refresh.

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