

Partnerships

Proposals for change

Consultative Draft

*Health and Wellbeing Board
Community Safety Partnership
Safeguarding Adults Board
Local Safeguarding Children's Board*

Each of the above partnerships are asked to consider these proposals by 30 September 2016. If approved, the next step would be to agree a memorandum of understanding between the partnerships and develop a clear implementation plan which would introduce a new model of working from early 2017.



Strong partnerships are at the heart of the way we do things in Milton Keynes. We've long since realised that we will have greater impact on the lives of local people if we work closely together and our Council Plan for 2016-2020 recognises the development of our approach to partnerships as a key priority.

Like other areas we have developed extensive partnership arrangements, underpinned with robust governance and these arrangements have served us well.

But now, more than ever, we have to reconsider how to use best our limited resources.

Simply put, we have to find a way to streamline the way we plan and do things together and ensure that we are clear who is doing what and why.

We also need to ensure that our capacity to challenge ourselves is not lost as we know this makes a real difference and drives innovation.





We set about tackling this issue by commissioning a peer review of our Health and Wellbeing Board. One of the recommendations was to clarify the strategic alignment between the Health and Wellbeing Board and our major plans, strategies and corporate delivery arrangements.

This document summarises our thinking and proposed changes to the way we work together for the benefit of local people's safety, health and wellbeing.

Leading the way

Each of our main partnerships all have clear roles and responsibilities together with legal duties. These are set out overleaf.

Clearly there cannot be one partnership that leads, or that replaces others, but we can do better joining up the work of each of these partnerships. Over the next few pages we explain how we think we can do that.

A closer look at what they do...

The **Health and Wellbeing Board** is required by the Health and Social Care Act 2012 with duties to encourage integrated working and to publish the Joint Strategic Needs Assessment and the Joint Health and Wellbeing Strategy.

The **Community Safety Partnership (Safer MK)** is required by the Crime and Disorder Act 1998 to bring key agencies together to do all they reasonably can to prevent crime and disorder and the misuse of drugs, alcohol and other substances and to reduce reoffending.

The **Safeguarding Adults Board** is required by the Care Act 2015 to lead adult safeguarding in its area and assure itself that local safeguarding arrangements and partners are acting to help and protect vulnerable adults.

The **Local Safeguarding Children's Board** is required by the Children Act 2004 to coordinate what is done to safeguarding and promote the welfare of children and to ensure the effectiveness of what is being done.





Getting organised

Often the same issues are considered across two or more partnerships. This isn't a good use of our time and effort. We also need to improve the way we use city-wide data to identify issues, take an evidence based approach and target resources where they are most needed.

We think that having a single secretariat will help with this and manage the business of all four partnerships better (**Proposal 1**). The secretariat would be responsible for:

- Agenda planning and co-ordination
- Facilitating meetings and sub groups
- Supporting multi agency planning
- Recording and tracking agreed activity
- Reporting and performance management

We would create the new team though bringing together existing resources into one place with a senior colleague leading this important work (**Proposal 2**)

Ensuring strong, connected leadership

Strong leadership is at the heart of any effective partnership. Our Health and Wellbeing Board is chaired by the Leader of the Council with our community safety partnership chaired by the responsible cabinet member with an independent chair of both the adult and children's safeguarding boards. We cannot see that these arrangements need to change.

We think the development of chairs group, meeting every three months or so would support effective cross partnership working and communication and shape forward planning **(Proposal 3)**.

Getting things done

Our Health and Wellbeing Board needs new supporting arrangements in order to ensure it can get things done. The current starting well, living well and aging well sub groups are proving difficult to sustain.





So we think that a Health and Wellbeing Board Strategy Delivery Group should be established. We think this group should be chaired by our Director of Public Health and meet monthly. The focus of the group should be entirely on the delivery of the Health and Wellbeing Strategy (**Proposal 4**).

Reaching out to other partners

There are a wide range of partners who have an interest in the work of the Health and Wellbeing Board, including our local schools and the voluntary and community sector, but who cannot attend monthly board meetings or cannot all be easily accommodated.

Therefore we think a Health and Wellbeing Board Forum should be held every six months, led by the Health and Wellbeing Board chair, to provide the opportunity for representatives from a wide range of partners to come and hear about our work, find out how we are doing and give us their feedback (**Proposal 5**).

Joint commissioning

For the Health and Wellbeing Board to be able to facilitate integrated working we need effective joint commissioning arrangements. We have had a Joint Commissioning Board for some time now, but it needs to change to focus more on integration.

Therefore we think the Joint Commissioning Board should be replaced with a new board focused on integration as well as commissioning. It would monitor jointly commissioned services, have responsibility for the Better Care Fund and would coordinate our work on the emerging NHS Sustainability and Transformation Plan (STP).

The board should meet monthly, co-chaired by the CCG Chief Executive and the council's Corporate Director – People and report to the Health and Wellbeing Board **(Proposal 6)**.





Safeguarding

There are some important distinctions between the work to protect adults and children. But there are similarities and things we could do better together. Often the same people are sitting around the table at both the adults and children's safeguarding boards.

So, following the Alan Woods review of local children's safeguarding boards, we think it is now time to move things forward and create a single Safeguarding Executive Board to strengthen our multi-agency work, enabling the three key agencies (health, police and the local authority) to revisit multi-agency arrangements for protecting children.

This new Executive Board would be supported by a dedicated children's and an adults sub group, replacing the current business management groups **(Proposal 7)**.

Proposals in summary

A single secretariat to manage the business of all four partnerships (Proposal 1) bringing together existing resources (Proposal 2)

A chairs group to support effective cross partnership working and communication and shape forward planning (Proposal 3).

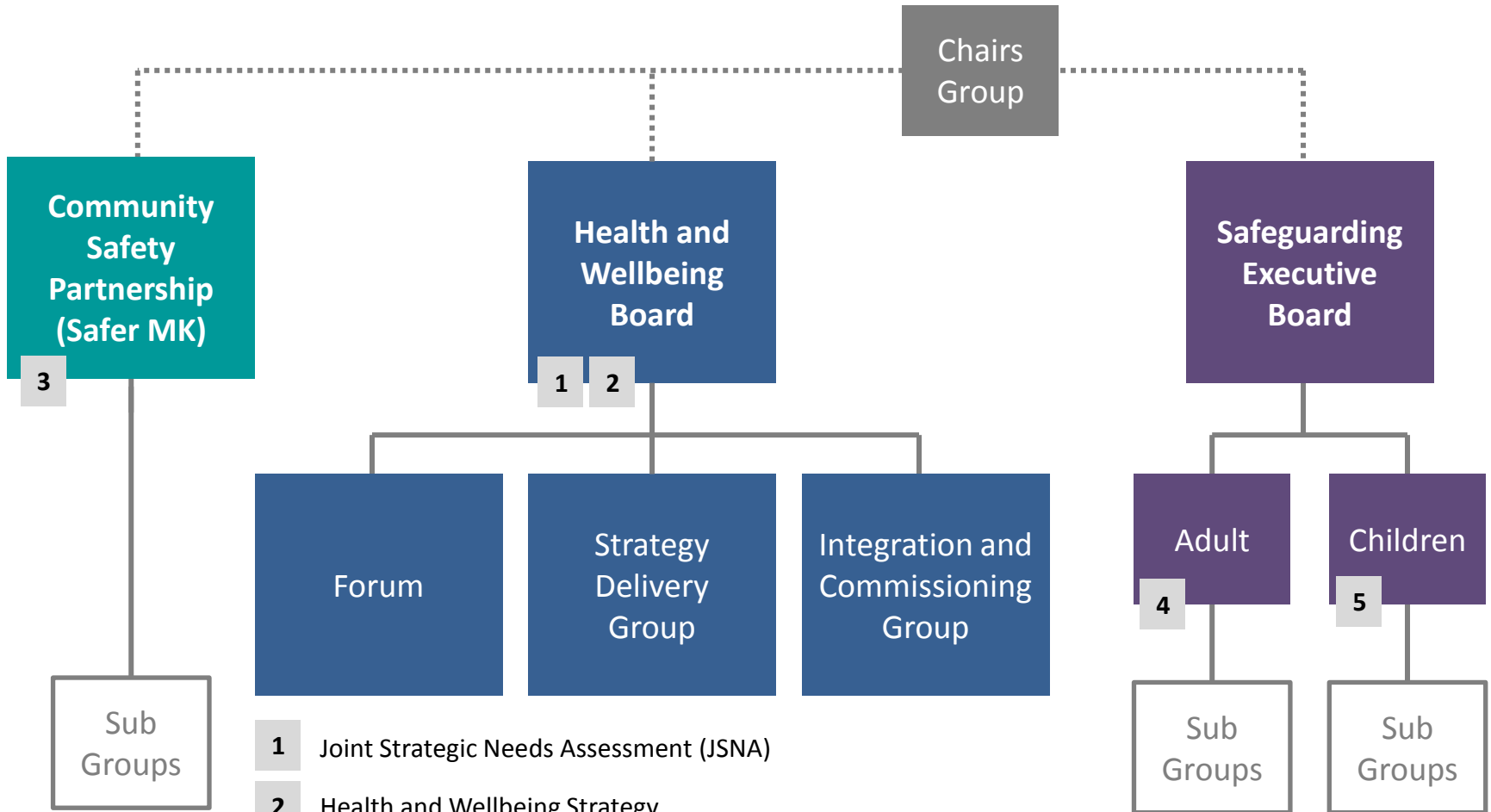
A single Health and Wellbeing Board Strategy Delivery Group to deliver the Health and Wellbeing Strategy (Proposal 4) and a Forum to provide the opportunity for other partners not on the board to engage (Proposal 5).

A new board, accountable to the Health and Well being Board, focused on integration as well as commissioning (Proposal 6).

A new safeguarding executive board, with separate adults and children's sub groups (Proposal 7).



Shared Secretariat



- 1 Joint Strategic Needs Assessment (JSNA)
- 2 Health and Wellbeing Strategy
- 3 Community Safety Strategy
- 4 Safeguarding Adults Strategy
- 5 Safeguarding Children Strategy

Proposed