



HEALTH AND WELLBEING BOARD 29 MAY 2025

REPORT OF HEALTH & WELLBEING BOARD

HEALTH & WELLBEING BOARD DEVELOPMENT SESSIONS EVALUATION

Purpose of report

1. The purpose of the report is to provide an update to the Health and Wellbeing Board (HWB) on the evaluation of the development sessions that were conducted during 2024-25. Based on these insights the report will recommend an approach for future sessions.

Recommendation

2. The Board is Requested to:
 - (a) Note the feedback from the development session evaluations;
 - (b) Note the recommendations and key themes that came out of the sessions;
 - (c) Agree next steps for future HWB development sessions.

Background

3. Health and Wellbeing Board (HWB) development sessions are designed to enhance the effectiveness of board members in their roles. These sessions focus on building leadership skills, improving strategic decision making and fostering collaboration between partners. They also provide a space for board members to reflect on priorities, explore best practices and drive improvements in local health and wellbeing outcomes.
4. During 2024-25, five development sessions were held, covering key areas to support the effectiveness of the Health & Wellbeing Board and respective sub-groups. The sessions held were:
 - **Best Start in Life** - The focus of this session was to identify the key challenges for children and families in Leicestershire with regards to the Best Start for Life Priority of the JLHWS, what was working well

and what could be collaboratively worked through to make progress on the challenges and maximise strengths and opportunities.

- **Staying Healthy, Safe & Well** – the objective of this session was to identify what was working well within the partnership and what were the challenges, including which priorities needed greater attention.
 - **Living & Supported Well** – the purpose of this session was to share an update on outcomes and achievements to date and agree the direction of travel for this priority in 2025-26.
 - **Dying Well** – the aim of this session was to explore the End-of-Life current offer and its strengths and areas of development at system, place and neighbourhood.
 - **Improving Mental Health** - This session provided an opportunity to understand the patient and resident journey and review overlapping priorities of other organisations to ensure alignment and prevent duplication.
5. The development sessions were facilitated by an external provider, ensuring expert guidance and a structured approach to each topic. Key stakeholders were carefully identified to help shape the agenda, ensuring that the sessions addressed the most relevant issues. Appropriate stakeholders were then invited to attend, ensuring a diverse group. Each session ran for half a day and featured a blend of presentations, discussions and tabletop activities, providing an interactive and engaging environment for all participants. This format allowed for meaningful contributions and in-depth exploration of key themes.
 6. These sessions received positive feedback from participants highlighting their value in enhancing collaborations, strategic thinking, and understanding of local health priorities. Given the benefits and engagement seen throughout the year, at the Health & Wellbeing Board meeting held on 27 February 2025, the board committed to continuing these sessions on a bi-annual basis to further strengthen its impact and drive improvements in health and wellbeing outcomes.

Key Themes & Recommendations

7. During the five developments sessions held throughout 2024-25, a number of key themes emerged, reflecting the priorities and discussions of key stakeholders that attended the sessions. These themes highlight important areas of focus, including strategic collaboration, community engagement and health inequalities. Each session provided valuable insights that have shaped ongoing discussions and future planning within HWB subgroups. The themes identified are illustrated below:

- Pooling of budgets and/or resources including joint procurement opportunities;
- Improved join-up between subgroups;
- Patient Involvement, i.e. active listening;
- Data (sharing and using it effectively);
- Building resilience amongst communities;
- Engagement & communication with communities;
- Meaningful engagement of the voluntary sector;
- Behaviour-change across the partnership – systems thinking approach;
- Remove barriers from working across different organisations.

8. Over the past year, various subgroups have presented their recommendations to board, reflecting their analysis and discussions on key issues. These recommendations aim to address critical challenges and improve outcomes in specific areas of focus. The following is a summary of the recommendations put forward by the subgroups during this period, highlighting their proposed actions.

- **Staying Healthy Partnership (Staying healthy, safe & well strategic priority)** - agreed to spotlight the following priority areas. These focus areas are alongside the SHPs existing remit to monitor ('watch') and champion activity across a range of delivery areas:
 - **Health and the Strategic Planning System** – build on and enhance the existing collaborative work to increase awareness, and consideration of health implications and requirements within planning policy and decision making.
 - **Healthy Weight** – to come together and champion a whole systems approach and joint agenda and the co-ordination of resources towards healthy weight, food and nutrition.
- **Children & Family Partnership (Best start for life priority)** - agreed to prioritise the following areas and embed into the current planning process and planned reviews:
 - Transferring of data/information sharing and communication between organisations;
 - Engagement and communication with communities;
 - Workforce development, recruitment and retention;
 - Identifying opportunities for joint working or pooling of resources, including better engagement with the voluntary sector.
- **Mental Health Place-based Group (Improving mental health - cross cutting priority)** - agreed to work on improving challenges identified at the session including:
 - Role of the Health and Wellbeing Board to provide a link between system, place and neighbourhood;
 - How work takes place effectively across the sub-groups – there is no clear join up between the sub-groups around common

themes such as mental health, where there are potential overlaps with other sub-groups including the Children and Families Partnership, the Staying Healthy Partnership and Integration Executive.

- Commitment required from all partners to communicate and challenge ways of working to effect change (through greater collaboration).
 - Help remove barriers of working across different organisations with different cultures and differing often complex governance structures.
 - The need to work effectively across system, in particular the need to work more effectively with districts and neighbourhoods with greater communication between system, place and neighbourhoods regarding priorities.
 - How to engage meaningfully with the Voluntary and Community sector.
 - Review of Joint Commissioning Group is required (sits within the Integration Executive subgroup of the Health and Wellbeing Board).
 - Strategy and commissioning at place level through joint decision-making processes.
 - Proactive early intervention and prevention .
- **Integration Executive (Living and Supported Well priority)** - agreed in 2025 to focus on key areas identified by the group which includes:
 - Prevention (80% of budget is spent on 20% of population using service) need to ensure investment is right;
 - Ensuring place-based needs are correct – targeting the right care at the right place;
 - Ensure effective use of resources e.g. pooling/sharing budgets and people;
 - Reduction in Falls/Frailty;
 - Focus on long-term conditions;
 - Promoting Independence & Self-management.
- **Integration Executive (Dying Well priority)** - agreed to follow-up actions:
 - Cross reference the place and ICB strategies and identify any gaps;
 - Identify what combined offers are possible;
 - Strengthen links with Children’s Services and Voluntary Sector Organisations;
 - Align the JLHWS to LLR strategy priorities;
 - Form a reporting programme to HWB;

- Identify priority workstreams to feed into the Integration Executive.

Feedback from HWB Members

9. A survey was sent out to HWB members to gather their views on the 2024-25 development sessions, seeking feedback on their effectiveness, content and overall impact. The responses provided valuable insights into the strengths of the sessions, as well as areas for improvements. The key findings from this survey are presented in this section of the report, offering comprehensive overview of members' perspectives and to help inform future development planning.
10. In total 6 Health and Wellbeing Board members responded to the survey. Out of the 6 respondents 5 attended at least 3 development sessions.
11. HWB Board members were asked, how they would rate the development session/s. 5 respondents stated that the sessions were either good or excellent, 1 respondent stated that the sessions were satisfactory and none of the respondents stated that the sessions were poor.
12. HWB Members were asked what the key insights or takeaways from the session were. The following responses were given:
 - Good group discussions sharing knowledge with each other;
 - Understanding what other organisations were doing for each area;
 - That there is still a gap on the VCSE being a full part of things, there is a huge role that the VCSE can play;
 - An understanding of the main work and priorities of the sub-groups;
 - A willingness for a system wide approach and the need to stop duplication within our systems.
13. HWB Members were asked what aspects of these sessions worked well. The following responses were provided:
 - Everyone genuinely listening to each other and recognising each other's skill sets;
 - The group discussions;
 - The structure was good, Deborah was an excellent facilitator, good cross section of partners and also very interactive;
 - Presentations from lead officers and the chance to shape the direction of the sub-groups and the HWBB.

14. HWB Members were asked what could be improved for future sessions. The following responses were provided:
- We are spending a lot of time doing developing, but it doesn't feel like we are spending time putting that development into action;
 - More goal oriented;
 - More time to delve and then a follow up session to review actions and progress;
 - More partners attending and engaging.
 - Not the sessions themselves but would want to see feedback on the outcomes of the sessions - e.g. what changed as a result of the sessions
 - Outcomes - what has happened next? Highlighting what has been already achieved.
15. HWB Members were asked whether sessions were relevant to their area of work. All respondents stated that the sessions were relevant (either somewhat or very relevant) to their area of work.
16. HWB Members were asked what topics or areas they would like to see covered in future development sessions The following responses were provided:
- A lot of the important areas have been covered;
 - Neighbourhood health and care; commissioning;
 - Dentistry / oral health;
 - Working with the VCSE and local communities;
 - It would work to go through the groups again - learning more on progress made by them;
 - Strengthening public and patient engagement / Co-production with service users and communities.
17. HWB Members were offered an opportunity to provide further comments or suggestions. The following responses were provided:
- Externally facilitated sessions;
 - Morning sessions rather than late afternoon;

Next steps

18. Following feedback received, it is recommended that HWB development sessions are held bi-annually commencing in 2026. As a workshop for the Better Care Fund (BCF) is being scheduled for HWB members in the Autumn, coupled with commitments for JLHW Strategy review meetings, this timeline will help balance workloads, provide adequate time for preparation and the commitments within the revised strategy will also be finalised.

19. When designing future development sessions, feedback from previous sessions will be carefully considered to ensure the sessions are effective and engaging. Appropriate stakeholders will be invited to participate, ensuring relevance and diverse perspectives. The sessions will include a mix of presentations, discussions, and interactive activities to enhance engagement and learning. Where appropriate, an external facilitator will be used to bring expertise and an objective perspective. Clear session goals and objectives will be established in advance and insights from previous sessions, including outcomes and follow-up actions, will be incorporated to drive continuous improvement.
20. The specific topic areas for future development sessions will be agreed upon closer to the time to ensure they remain relevant and responsive to emerging needs. However, current suggestions gathered from session evaluations will be considered, including the role of voluntary sector organisations, neighbourhood health & care and commissioning. These topics have been highlighted as key areas of interest and will be proposed for inclusion.

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