The unique history and needs of different localities mean that each health and wellbeing board will need to find its own best way of serving children and young people. Nonetheless, the following practical examples may be helpful in providing board members with some specific illustrations of how others have sought to improve the coordination and leadership of this important issue.

This paper was developed by the health and wellbeing board learning set for children and young people, part of the National Learning Network for health and wellbeing boards.

Integrated governance between the health and wellbeing board and children’s trust – Nottinghamshire

In Nottinghamshire, the shadow health and wellbeing board was formed in 2011 as part of the Government’s early adopter programme. The early
work on the health and wellbeing board and joint health and wellbeing strategy coincided with a review of the future operating model for the children’s trust. As a consequence, the trust decided that it would integrate with the governance structure of the health and wellbeing board. This has now been achieved and a key feature of this is that the chair of the children’s trust sits on the health and wellbeing board. At the same time, the health and wellbeing board has approved plans to implement a sub-structure, with an implementation group working below the level of the board to implement the health and wellbeing strategy. This implementation group includes the chair of the children’s trust and the independent chairs of the local safeguarding boards (children’s and adults).

In developing the joint health and wellbeing strategy, an early decision was taken to include a chapter focusing on the needs of children and young people. This is being developed so that it complements the existing Children, Young People and Families Plan. The Joint Strategic Needs Assessment (JSNA) chapter for children and young people has been updated so that the most current information is included in the children, young people and families plan and the emerging joint health and wellbeing strategy. At the same time, the senior health policy and commissioning post within the county council’s Children, Families and Cultural Services Department has been transferred to the Public Health Directorate, which has already integrated into the council on a shadow basis.

During the course of this process, the director of children’s services works closely with the director of public health to ensure that this post continues to focus on the needs of children and young people, while integrating with the work of public health and taking the lead on the children’s element of the joint health and wellbeing strategy (and the children’s aspects of the NHS reforms). As part of this process, the post holder is working with senior colleagues in public health to ensure an effective interface with the new clinical commissioning groups.

One of the most positive outcomes from this collaborative approach is a decision made by the health and wellbeing board to commission the children’s trust to provide a report to the board which “audits” the current local arrangements for children against the key questions and challenges set out in the poster which emerged from the national learning set.

Opportunities for young people as a common outcome: the health and wellbeing board and youth unemployment – South Tyneside

In South Tyneside, the shadow health and wellbeing board was established as an early implementer in 2011. The board had a number of development workshops to discuss and develop shared priorities for the evolving joint health and wellbeing strategy.

John Wilderspin, national director of health and wellbeing board implementation attended a
developmental workshop session with the shadow board in November 2011 which considered the joint health and wellbeing strategy development. It was decided at this workshop that youth unemployment was one of the biggest challenges to health and wellbeing in the borough – and as such should be a major priority.

The joint health and wellbeing strategy has now been written with a significant chapter and set of actions and recommendations for the partnership around initiatives to reduce youth unemployment which, at present, puts South Tyneside in the worst ten boroughs nationally.

The South Tyneside Economic Regeneration Board will direct its energies and resources to working with the health and wellbeing board. Together, they aim to effect major improvement in opportunities for young people (internships, apprenticeships, employment and training). All partners across both boards are enthusiastically engaging in trying to make a shift.

Strategically, the outcomes of this work has been the formation of a youth taskforce with key players and employers delivering 200 apprenticeships and 500 jobs for 18-24 year olds. This is supported by the council-funded initiative of six months of wages support. The joint work has also led to a renewed focus on getting learning disabled adults into employment.

‘Most importantly the trust listens to what children and young people tell us is important to them.’

Shared priorities between the health and wellbeing board and children’s trust – East Riding of Yorkshire

In East Riding, the shadow health and wellbeing board was formed in 2011 as part of the Government’s early adopter programme. This is building on a history of productive joint commissioning between the local authority and the East Riding of Yorkshire Primary Care Trust. Robust governance arrangements already existed between the two bodies, through the local strategic partnership, the children’s trust board, local safeguarding children’s board and parallel arrangements for adult and older people’s services.

The children’s trust is responsible for the delivery of the Children and Young People’s Strategic Plan 2008-2012. The plan has three core themes – safeguarding children and young people, integrated working and early intervention and prevention. These themes underpin all that we are trying to achieve for our children and young people. The plan is also the mechanism to ensure that children’s trust partners are all contributing to the achievement of key national and local performance measures. While the plan is reviewed every three years, it is subject to an annual refresh. As part of the refresh process, the children’s trust looks at areas for further improvement highlighted by inspections (Ofsted and the Care Quality Commission); feedback from key stakeholders including schools, parents and carers; and areas of need identified by commissioning analysis and local and national surveys. Most importantly, the trust listens to what children and young people tell us is important to them.

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This year, six additional priority outcomes emerged. One of these – to improve children and young people’s emotional health and wellbeing – is of particular relevance to the health and wellbeing board. The children’s trust board has asked the health and wellbeing board to support the delivery of this outcome. To this end it has been agreed that this outcome will form one of the three key outcomes for focus of our JSNA and resultant joint health and wellbeing strategy.

The additional research and analysis that underpins the JSNA process will determine the specific areas we will focus our resources on. It is hoped that this will inform our commissioning strategies and services we deliver together to improve the emotional health and wellbeing of our children.

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