

## MUNICIPAL YEAR 2015/2016

**MEETING TITLE AND DATE**  
**Health and Wellbeing Board**  
15<sup>th</sup> October 2015

Report of Shahed Ahmad  
Director of Public Health

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| <b>Agenda - Part: 1</b>  | <b>Item: 6</b> |
| <b>Subject:</b><br><b>Update on Areas of Influence from Development Session held on 14<sup>th</sup> September 2015</b> |                |
| <b>Wards: All</b>  |                |
| <b>Cabinet Member consulted:</b><br>Councillor Taylor  |                |
| <b>Approved by:</b> Shahed Ahmad   |                |

### 1. EXECUTIVE SUMMARY

At the Health & Wellbeing Board Development Session held on 14<sup>th</sup> September 2015, attended by members of the Health & Wellbeing Board; the topic of discussion was "Influence". The objectives for this session were to explore:

"What do we want to influence?"

"How do we influence?"

"How do we know that we have succeeded?"

The purpose of this report is to provide the Health & Wellbeing Board with an update on the areas where the Board should focus on to demonstrate systems leadership.

### 2. RECOMMENDATIONS

To note the update on work undertaken at the Health & Wellbeing Board Development Session held on 14<sup>th</sup> September 2015.

### 3. BACKGROUND

A Development Session was held on 14<sup>th</sup> September 2015, the purpose of this meeting was to consider how the Board influences. The objectives for this session were to explore:

"What do we want to influence?"

"How do we influence?"

"How do we know that we have succeeded?"

Initially the Board discussed areas where influence had already been successful. The example of improvements to blood pressure management in Enfield (and the positive impact this has made to life expectancy) was cited. The role of the Health and Wellbeing Board on influencing the Better Care Fund was also cited.

In terms of who to influence a broad range of colleagues were identified including the community, Greater London Authority, NHS England, Public Health England, CCG, NHS Trusts and schools.

In terms of what we want to influence we agreed that this fell into 2 categories, the first was “Behaviours” and the second was “Systems Leadership”.

In terms of systems leadership, sugar was explored as a possible area where Enfield could show national systems leadership. It was agreed that a paper would be brought to the December Health and Wellbeing Board exploring the possible areas where the HWB should focus on to demonstrate systems leadership.

It was agreed that the Health and Wellbeing Board Chair and Vice Chair should send out after the board meeting any key communications from the Board, potentially in the form of a tweet.