

Dover Shepway Health and Wellbeing Board Action Points, following the 3rd Facilitated Session:

1. Need to consider lateral relationships – collaboration with other HWBs and CCGs* and also relationship to National Commissioning Board
2. Thought needs to be given about sequence of writing HWB strategies’ – County and local
3. Identifying gaps where more than one CCG involved
4. We need to ensure emphasis on a local bottom up approach
5. We ought to consider potential for conflict and worst case scenarios – whose responsibility lies where and how to deal with one partner in disagreement*
6. We need the granular information which GPs have to do something to really make a difference
7. KCC HWB strategy is a high level document with local chapters’*
8. We need to ensure that CCG engagement includes HWBs – alignment
9. Increasingly we need to be aware of others, e.g., voluntary sector, providers.
10. Governance* – Terms of Reference and membership to be agreed formally before going live: 04th December meeting to consider
11. Clear definition of roles, accountabilities and responsibilities*
12. Need to agree Voluntary and Community Sector representation
13. We need to acknowledge that we count our beans differently¹
14. We need to embrace both quick wins and longer term aspirations – agree priorities and lead organisations (where necessary)
15. Build Dover Shepway Health and Wellbeing Board priorities into Corporate Plans/Aims and Objectives at next point of review

* Incorporated into final Terms of Reference and Membership?

¹ Will be part of/recognised through the Joint Integrated Commissioning Strategy