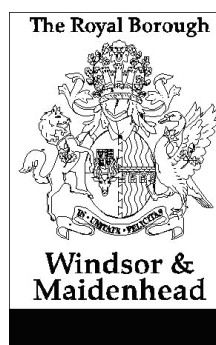


Report for: ACTION



<b>Contains Confidential or Exempt Information</b>	NO – Part 1
<b>Title</b>	Membership of the Health and Wellbeing Board
<b>Responsible Officer(s)</b>	Alison Alexander, Managing Director and Strategic Director of Adults, Children and Health Services
<b>Contact officer, job title and phone number</b>	Catherine Mullins, Health and Wellbeing Development Officer 01628 68 3664
<b>Member reporting</b>	Cllr David Coppinger, Lead Member Adults, Health and Sustainability
<b>For Consideration By</b>	Health and Wellbeing Board
<b>Date to be Considered</b>	8 March 2016
<b>Implementation Date if Not Called In</b>	Immediately
<b>Affected Wards</b>	All

### REPORT SUMMARY

1. Due to the organisational changes that have taken place in the Council, the Health and Wellbeing Board (HWB) representation from Local Authority Officers has reduced from three Officers to two. Under the criteria of the Health and Social Care Act 2012, to be fully compliant with Section 194 (2) of the Act, which identifies three specific Officer roles as being within the core membership of the HWB this is a proposal to include the Deputy Director Health and Adult Social Care as a member of the HWB.
2. Additionally there is a communication from NHS England that has identified that the Better Care Fund (BCF) Manager for the South Central region of NHSE. There has been a request to include the role as a presence on the HWB to accelerate knowledge sharing and strategic support.

### If recommendations are adopted, how will residents benefit?

Benefits to residents and reasons why they will benefit	Dates by which residents can expect to notice a difference
There are no direct benefits to residents in terms of measureable outcomes; however there will be more collaboration between key roles in the strategic planning of services which will have indirect service improvements.	

## **1. DETAILS OF RECOMMENDATIONS**

### **RECOMMENDATION: That the Health and Wellbeing Board:**

- i.** Enhance the skills and expertise of the Health and Wellbeing Board membership through including the Deputy Director Health and Adult Social Care as a permanent member to the HWB.
- ii.** Include the Better Care Fund Manager for South Central NHS England as a co-opted member of the HWB in line with the letter from NHS England which states that the person will not have a vote (decision making powers) but is there to offer strategic support and knowledge sharing on key issues, particularly Better Care Fund planning.

## **2. REASON FOR RECOMMENDATION(S) AND OPTIONS CONSIDERED**

- 2.1 The Health and Social Care Act 2012 created the Health and Wellbeing Board programme and identified the statutory core minimum membership for the HWB. It is the first Committee of Council that has non-elected roles on a decision making Board due to sections of the Local Government Act 1972 being specifically dis-applied to the HWB.
- 2.2 The roles that are identified in the Act as being from Local Authority Officers and a part of the core membership for the HWB are:
  1. Director of Childrens Services
  2. Director of Adults Services
  3. Director of Public Health
- 2.3 Until January 2016, these three roles were held by three different people within the local authority setting. Due to an organisational reorganisation, the roles of Director of Childrens Services and Director of Adults Services have been amalgamated into one position and as a natural consequence, the number of Officers on the HWB has reduced. This is not in keeping with the ethos of the Act in regard to the numbers of Officers who are represented on the HWB as core members.
- 2.4 The restructure of the Council has identified that the role of the Deputy Director for Health and Adult Social Care would be able to make significant contributions to the work of the HWB and could strengthen the Officer representation. Therefore this paper is a formal consultation to propose that the Deputy Director for Health and Adult Social Care becomes a full formal member of the RBWM HWB.
- 2.5 In response to the letter from NHS England in regard to the Better Care Fund Manager as a regular co-opted member of the HWB, it is proposed that this is agreed within the caveats outlined in the letter, therefore the role does not have decision making capacities but is able to offer knowledge sharing and support to the HWB about key areas where NHSE are involved.

<b>Option</b>	<b>Comments</b>
<p>To accept the role of the Deputy Director of Health and Adult Social Care as a full member of the Health and Wellbeing Board</p> <p><b>This is the recommended option</b></p>	<p>Including the role of the Deputy Director onto the HWB will allow for the expertise and experience of the Deputy Director to contribute to the decisions and work of the HWB and ensure that there is compliance with the ethos of the Health and Social Care Act 2012 in relation to numbers of Local Authority Officers on the Health and Wellbeing Board</p>
<p>Not to accept the role of the Deputy Director of Health and Adult Social Care as a full member of the Health and Wellbeing Board</p> <p>This is not recommended</p>	<p>Not including the role of the Deputy Director on the HWB may limit the perspectives of the members of the HWB and their contribution to the decision making and capacity to deliver the objectives of the HWB</p>
<p>To accept the role of the NHSE Better Care Fund Manager as a co-opted member onto the Health and Wellbeing Board within the agreed parameters of the role</p> <p><b>This is the recommended option</b></p>	<p>The NHSE Better Care Fund Manager being on the HWB in a non-decision making capacity will be able to give insight and liaison with the HWB and NHSE, thus improving relations and collaboration in regard to developments that would impact the local area</p>
<p>Not to accept the role of the NHSE Better Care Fund Manager as a co-opted member onto the Health and Wellbeing Board within the agreed parameters of the role</p> <p>This is not recommended</p>	<p>Not having the NHSE Better Care Fund Manager on the HWB as a co-opted member may negatively impact the communication and liaison with NHSE and may reduce the levels of insight of the shared work that is completed through the HWB</p>

## 1. KEY IMPLICATIONS

<b>Defined Outcomes</b>	<b>Unmet</b>	<b>Met</b>	<b>Exceeded</b>	<b>Significantly Exceeded</b>	<b>Date they should be delivered by</b>
The Deputy Director attends the HWB as an officer as a full member building capacity and expertise	There are only two Officers on the HWB	The Deputy Director attends the HWB meetings	The Deputy Director attends the HWB meetings, leading and coordinating elements of the HWB work		May 2016 (first meeting of the HWB in the 2016/17 municipal calendar)

<b>Defined Outcomes</b>	<b>Unmet</b>	<b>Met</b>	<b>Exceeded</b>	<b>Significantly Exceeded</b>	<b>Date they should be delivered by</b>
The NHSE Better Care Fund Manager is co-opted onto the HWB and gives strategic insights to key service developments with NHSE	The NHSE Better Care Fund Manager does not attend the HWB meetings	The NHSE Better Care Fund Manager does attend the HWB meetings and gives insights that contribute to achieving better outcomes to residents through the BCF	The NHSE Better Care Fund Manager does attend the HWB meetings and gives insights that contribute to achieving better outcomes to residents through the BCF and in others areas where NHSE has involvement		May 2016 (first meeting of the HWB in the 2016/17 municipal calendar)

#### **4. FINANCIAL DETAILS**

- 4.1 There are no financial impacts on the budget with either role being added to the HWB membership.

#### **5. LEGAL IMPLICATIONS**

- 5.1 The Health and Social Care Act S.194 (2) states there is a statutory requirement that there needs to be three Local Authority Officers as the minimum, these are stipulated as Director of Childrens Services, Director of Adult Services and Director of Public Health. Further guidance issued by the LGA states that there must be three LA officers to comply with the spirit of the Health and Social Care Act 2012. Sections 194 (8) and (9) of the Act if there is going to be a change in membership there is a duty to consult with existing HWB members about the changes, and therefore to the purpose of this paper is to comply with those sections of the Act for the roles of the Deputy Director and the NHSE Better Care Fund Manager to be members of the HWB

#### **6. VALUE FOR MONEY**

- 6.1 There are no specific measurable value for money implications to the expansion of the membership of the HWB, though there are some foreseeable efficiencies in terms of staff time and work developments through better and effective liaisons coordinated through the HWB

## **7. SUSTAINABILITY IMPACT APPRAISAL**

7.1 None

## **8. RISK MANAGEMENT**

8.1 There are no risks associated with these recommendations

## **9. LINKS TO STRATEGIC OBJECTIVES**

9.1 The strategic objectives of the Council are supported through the actions and activities of the HWB, both explicitly and implicitly

## **10. EQUALITIES, HUMAN RIGHTS AND COMMUNITY COHESION**

10.1 Not Applicable

## **11. STAFFING/WORKFORCE AND ACCOMMODATION IMPLICATIONS**

11.1 None

## **12. PROPERTY AND ASSETS**

12.1 None

## **13. ANY OTHER IMPLICATIONS**

13.1 None

## **14. CONSULTATION**

14.1 Under the Health and Social Care Act 2012 S.194 (8) and (9) changes to the membership of the HWB have to be agreed by the existing HWB members. The method of this consultation with existing HWB members is not stipulated, and so this paper is to present the options in regard to membership to the HWB.

## **15. TIMETABLE FOR IMPLEMENTATION**

<b>Date</b>	<b>Details</b>
8 March 2016	Paper regarding membership options to the HWB meeting with a decision to be made
8 June 2016	First meeting of the HWB in the 2016/17 municipal year with the new members present

## **16. APPENDICES**

16.1 None

## **17. BACKGROUND INFORMATION**

17.1 The Health and Social Care Act 2012 created Health and Wellbeing Boards as a forum for health and social care service to work together and deliver a range of statutory functions. The statutory powers for HWBs came into effect from April 2013

17.2 A core minimum membership for HWB was specifically identified in the Act of:

- At least one elected representative, which may be the elected Mayor or leader of the Local Authority and / or a Councillor or Councillors nominated by them.
- The Director of Childrens Services
- The Director of Adults Services
- The Director of Public Health
- Representatives of Local Healthwatch
- Representatives of each relevant Clinical Commissioning Group (one CCG with the consent of the HWB may represent another CCG that has a boundary within or coinciding with the Local Authority area)

Additional members of the HWB may be appointed by the HWB and the Local Authority following consultation with members who are on the HWB.

17.3 HWBs are established as a Committee of Council as per the Local Government Act 1972. Section 194 of the Health and Social Care Act 2012 allows for people who are not elected members to have the same status as elected members on the HWB.