Health and Wellbeing Board

27 April 2015

Strengthening the Health and Wellbeing Board

1. Purpose

The remit of the Health and Wellbeing Board (HWB) is constantly evolving and, as a result, it is important that the HWB continues to review the infrastructure it has in place to inform and support it effectively.

This paper proposes a new model of infrastructure. It was first discussed at the HWB development session on Monday 30th March and suggestions given then have been incorporated into the structure and terms of reference detailed within this document.

2. Recommendations:

Governance arrangements:

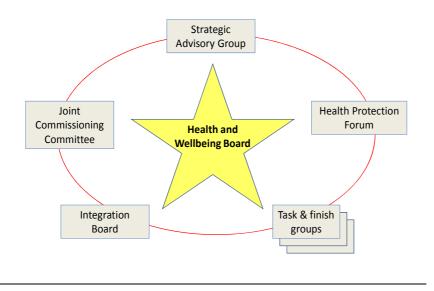
- 2.1 That the HWB agree the proposed future model for the HWB.
- 2.2 That the HWB agree to consult with key providers and partners on the terms of reference for the Strategic Advisory Group.

3. Report detail

The work of the Health and Wellbeing Board continues to develop around Integration including the Better Care Fund and the alignment of commissioning and there are a number of groups supporting that work that currently do not have direct links to the HWB. The HWB also acknowledges the need to ensure it fully engages key providers and partners and the current infrastructure does not facilitate that engagement.

Work has been done to identify existing groups with remits that are relevant to the work of the HWB and identify gaps. The proposed future model of infrastructure for the HWB consists of 5 groups, shown below:

Health and Wellbeing Board - Proposed model



Some of the groups are already in existence such as the Health Protection Forum, Task and Finish Groups and Integration Board. Other groups have been in existence in another guise such as the Joint Commissioning Committee (previously known as the Vulnerable Adults Executive Board). The Strategic Advisory Group has yet to be set up. Terms of reference are included in **appendix 1.**

The Strategic Advisory Group is intended to provide the opportunity for key providers and other partners to provide strategic input and support into the development and implementation of the work of the HWB. It will be the primary engagement forum for the HWB although other engagement opportunities are provided within the infrastructure through the Task and Finish Groups and Health Protection Forum and via other strategic meetings with HWB members that happen periodically on a bilateral basis.

Authors:

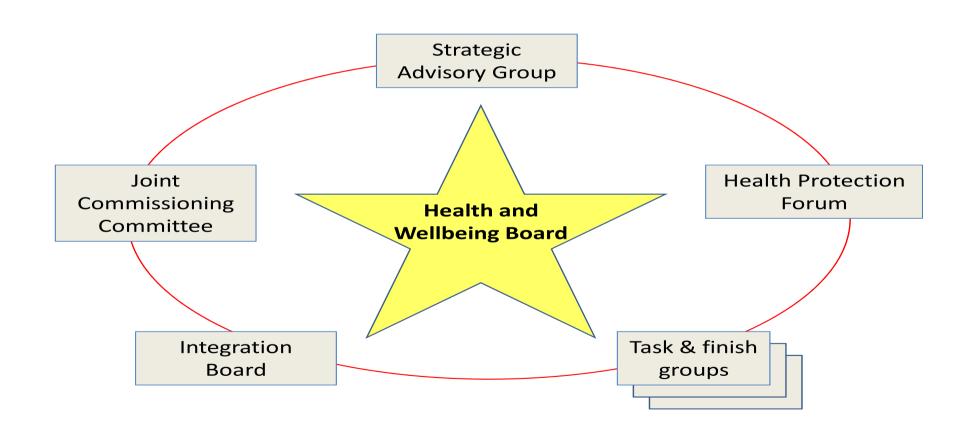
Jamie Morris
Executive Director of Neighbourhoods

Cath Boneham Public Health





Health and Wellbeing Board – A Potential Future Model



STRATEGIC ADVISORY GROUP FOR THE HEALTH AND WELLBEING BOARD (HWB)

Overall purpose

The purpose of this group is to bring together a small group of key providers and partners to provide strategic input and support into the development and implementation of key programmes for which the Health and Wellbeing Board (HWB) is responsible. It is expected that group members will also consider barriers that impede progress in improving the health and wellbeing of Walsall citizens and contribute to the development of local solutions.

It is intended that the agenda items for meetings of the Strategic Advisory Group (SAG) will be linked to the HWB agenda and work programme. This will enable outputs from SAG meetings to influence discussion and decision-making at the HWB.

Aim

This is to bring together an identified group of key providers and partners to provide strategic input and support into the development and implementation of the work of the HWB.

Objectives

- To support the development of the Joint Strategic Needs Assessment
- To contribute to the development of, and support the implementation of, the Health and Wellbeing Strategy and its identified priorities
- To support the development and implementation of the Better Care Fund and other pooled funds as appropriate
- To contribute to discussions about barriers to implementation of the work of the HWB and contribute to the development and implementation of local whole systems solutions
- To support the HWB in communicating and engaging with Walsall residents and service users about the work of the Board and how individuals can improve their own health.

Membership

Chair: Chair or Vice Chair of HWB

- Representatives from HWB x 2 (to include either CCG or LA if not represented through Chair above)
- Police
- Fire Service
- Representatives from key NHS providers: Walsall Healthcare Trust, Dudley and Walsall Mental Health Trust, Black Country Partnership Foundation NHS Trust
- Representative from Walsall Strategic Housing Partnership
- Representative from the Voluntary sector in Walsall x 2:
 - HealthWatch representative and 1 other
- Representative from Home Care Forum
- Representative from Care Home Forum

Chair

Either the Chair or Vice Chair of the HWB will chair the Strategic Advisory Group.

In order for the meeting to be quorate the following members must be present:

- Chair/Vice Chair
- Representative from HWB
- Representative from NHS or Adult Social Care key providers
- Representative from either Police or Fire Service

Role of members

- To act as a representative for their organisation /sector on the Strategic Advisory Group and ensure there is an effective two way dialogue between their organisation and the SAG
- To pro-actively contribute to the agenda items, resulting discussions and subsequent actions that are the outcomes from the decisions made
- To ensure they provide feedback to the HWB about local barriers to the improvement of health and wellbeing and contribute to the identification and implementation of local solutions
- To promote the work of the HWB and support the Board through the communication and engagement networks within their organisations in communicating and engaging with Walsall residents and service users.

Frequency of meetings

The meeting will take place once a quarter – approximately every 12 weeks.

Officer support for this group will be provided by Walsall Council though Public Health /Social Care and Inclusion. Other LA /NHS Officers will be in attendance in an advisory capacity as appropriate.

Governance arrangements /Reporting lines

This Group will have direct links with Walsall Health and Wellbeing Board and report at regular intervals.

Review

The terms of reference will be reviewed on an annual basis.

Walsall Health Protection Forum

Terms of Reference

Purpose

The purpose of the Walsall Health Protection Forum is:

- To provide an accountability framework for a number of existing partnership groups with a health protection remit and support the establishment of new groups where appropriate. The Health Protection Forum will receive assurance from the following workstreams /subgroups:
 - Local health resilience partnerships (West Midlands Emergency Planning Group)
 - Infection control (HCAI Steering Group)
 - o Sexual health
 - Antenatal /newborn and adult screening quality assurance groups
 - o Immunisation and vaccine preventable diseases
 - Environmental quality (Pollution control)
 - West Midlands Food Liaison Group
- To facilitate a co-ordinated strategic approach to health protection issues in Walsall
- To receive assurance from the subgroups regarding
 - o appropriate strategies /plans and testing arrangements
 - o progress against outcomes
- To review all significant incidents /outbreaks to identify lessons learned and to make recommendations to commissioners /providers /partners regarding necessary changes
- To receive and review risk registers from all subgroups; make recommendations to subgroups regarding mitigating actions and to commissioners where appropriate
- To encourage continuous quality improvement in health protection services in Walsall
- To provide health protection input into the JSNA

Membership

- Director of Public Health
- Consultants in Public Health
- Public Health England: Consultant in Communicable Disease Control
- NHS England Screening Co-ordinator
- NHS England Immunisation Co-ordinator
- Sexual Health Commissioner

- Emergency Planning Officer
- Environmental Health Lead
- General Practitioner and CCG representative
- Tuberculosis (TB) Lead
- Head of Infection Prevention and Control Public Health Walsall Council

Chair

The Health Protection Forum will be chaired by the Director of Public Health. Minutes will be produced by the administrative team of the Director of Public Health. Meeting papers will be circulated 7 days ahead of meetings with minutes circulated in a timely fashion to members following each meeting.

Quorum

Members representing subgroups / workstreams will be required to attend or to ensure that a suitable deputy is available to attend.

Governance arrangements /Reporting lines

The group will report to the Health and Wellbeing Board at Walsall Council. The group will also report to the Quality, Safety and Performance subgroup of NHS Walsall CCG on a regular basis.

Frequency of Meetings

The group will meet bi-monthly for the first 6 months and then once every quarter unless otherwise required to meet.

Reports

Short reports for discussion at the Health Protection Forum will be submitted by each subgroup at least 10 days ahead of the meeting to allow time for collation and circulation to the group.

Standing Items

Standing agenda items for each workstream /subgroup will include: summary of current situation; progress against outcomes; incidents managed and changes made; risks; suggestions for improvement.

Rotating Items

On an annual basis representatives from each of the workstreams /subgroups are expected to present an annual review which will include details of new policies and developments (in addition to the items detailed above) as well as progress against action plans in existence.

Review

The terms of reference will be reviewed on an annual basis.

Health and Wellbeing Board Task and Finish Groups Terms of Reference

Purpose

The purpose of the Task and Finish groups is to bring together key members of the Health and Wellbeing Board, commissioners, providers and other stakeholders to consider a health and wellbeing issue identified by the Health and Wellbeing Board (HWB) as being something that is a cross-cutting issue impacting on the service delivery of a number of partners. It is recognised that to improve performance an agreed strategy and delivery plan is required.

HWB members would encourage an approach that embraces doing things differently if this will deliver better outcomes. It is intended that the task and finish groups look at the evidence currently available, consider best practice elsewhere and develop plans of action and implementation that are dynamic and innovative to contribute to local solutions. The Task and Finish Groups will report back to the HWB on their progress.

Aim

To bring together commissioners, providers and partners around an identified issue related to the Health and Wellbeing Strategy (HWS) priorities. The groups will provide specific and focused input to support the development of action plans and their subsequent implementation. It is intended that the task and finish groups look at the evidence currently available, consider best practice elsewhere and where appropriate develop alternative plans of action and implementation for local services to improve outcomes.

Objectives

- To review local intelligence
- To understand service design and service interfaces
- To understand performance, areas of strength and areas of challenge
- To look at the evidence currently available
- To consider best practice elsewhere
- To contribute to discussions about barriers to innovation and progress

- To contribute to the development of dynamic and innovative plans of action that provide local whole system solutions
- To dedicate resource to support the implementation of the agreed action plans
- To agree measures of progress and timescales for targets
- To support the collection, collation and analysis of agreed performance data where appropriate
- To support the HWB in communicating and engaging with Walsall residents and service users about the work of the Task and Finish groups and how individuals can improve their own health in relation to the agreed topic.

Membership

- Representatives from the HWB: Councillors and GPs
- LA /NHS commissioner(s) with the identified HWS topic as part of remit
- Reps from providers/partners currently delivering services that are relevant to HWS topic (eg LA, Walsall Healthcare Trust, Dudley and Walsall Mental Health Partnership Trust, Voluntary Sector, Black Country Learning Disabilities Service, Registered Social Landlords Forum, Police, Fire Service).
- Representatives from Voluntary sector in Walsall (eg: HealthWatch, WVA)

Chair

The Chair of the Task and Finish Groups will be a representative from the HWB.

In order for the meeting to be effective the following members should be present:

- Chair /Vice Chair
- Representatives from key care agencies
- Lead commissioners (from NHS and LA)
- Lead providers of relevant agencies

Role of members

- To act as a representative for their organisation /sector on the Task and Finish Groups and ensure there is an effective two way dialogue between their organisation and the Task and Finish Groups, particularly regarding the resulting action plan and its implementation
- To pro-actively contribute to the agenda items, resulting discussions and subsequent actions that are the outcomes from the decisions made
- To support the work of the HWB and Task and Finish Groups as appropriate through the communication and engagement networks within their organisations in communicating and engaging with Walsall residents and service users.

Frequency of meetings

The group will meet at least once every 6 weeks over a 3-month period or as long as required to meet agreed targets.

Officer support for this group will be provided by Walsall Council or NHS Walsall CCG depending on the topic under discussion. Other LA /NHS officers will be in attendance in an advisory capacity as appropriate.

Governance arrangements /Reporting lines

The Task and Finish Groups will have direct links to the HWB and report on their progress to HWB members at regular intervals.

Walsall Health and Social Care Integration Board

Terms of Reference

Foreword

These terms of reference will be reviewed to take account of changes within and between organisational management arrangements and as the scale of integration of health and social care services and the subsequent impact upon organisations changes over time. Its primary focus in the short term will be on services for older people.

Purpose

The purpose is to provide a forum for senior leaders of the Health and Social Care system in Walsall to work together to transform those services that are primarily for older people. They will seek to do this by ensuring that the range of health and social care services required to meet the needs of older people within Walsall are better integrated to provide more cohesive and person-centred support that maximises independence and wellbeing.

Aims

The aims of the Board are to work in partnership to:

- Deliver the right care in the right place at the right time for frail older people to ensure that as many as possible remain in their own homes reducing reliance on institutional care (admissions to hospital, care homes or inpatient mental health provision)
- Enable a swift and safe return home following an episode of bed-based care.

Objectives

The remit of the Board will be to provide collective leadership in setting out plans to improve the system in the short, medium and long term to enable people to remain at home for as long as possible. The Board is committed to the principle of achieving integration and will explore the options available to the partnership for achieving this. Objectives will be to:

 oversee the development and prioritisation of a number of work streams to achieve the above aims

- ensure that the quality and safety of services is maintained in the development of new approaches and services
- ensure effective co-ordination between and within different health and social care partners
- evaluate the initiatives agreed and review plans as appropriate; and to:
 - o identify strategic risks to the delivery of its plans and agree mitigation as required.

Membership

The Board will have the following membership:

- Commissioners of Health and Social Care:
 - o Accountable Officer NHS Walsall CCG
 - o Interim Executive Director of Adult Social Care Walsall Council
 - o Head of Joint Commissioning: Social Care and Inclusion /NHS Walsall CCG
 - o Clinical Lead Nurse (Quality and Partnerships) NHS Walsall CCG
 - Clinical representation as appropriate
- Integrated Acute and Community Services Provider
 - Chief Executive Officer Walsall Healthcare NHS Trust
 - o Chief Operating Officer Walsall Healthcare NHS Trust
 - Clinical representation as appropriate
- Mental Health Trust
 - o Chief Executive Officer Dudley & Walsall Mental Health Partnership Trust
- Social Care and Inclusion
 - o Head of Community Care Walsall Council
- Public Health
- Director of Public Health Walsall Council

Frequency of meetings

Meetings will take place bi-monthly.

Governance arrangements / Reporting lines

- Accountabilities: through individual's organisation as and when appropriate
- Reporting: Health and Wellbeing Board

Joint Commissioning Committee (JCC)

Terms of Reference

(Schedule 1 to Section75 Agreement)

Foreword

These terms of reference will be reviewed following the current restructuring of joint commissioning arrangements to reflect greater joint working between Walsall Council and NHS Walsall Clinical Commissioning Group.

Aim

Our aim is to maximise the health and wellbeing of the people of Walsall by making best use of the combined resources for health and social care across agencies in Walsall and commissioning services of the highest quality.

Purpose

The JCC provides the overall strategic oversight and direction to joint commissioning arrangements for health and social care services in Walsall. It is responsible for planning the way that the council and the health service work together to commission health and social care for agreed care groups. It will manage and monitor pooled, non-pooled budgets and resources for these services in accordance with Section 75 Agreements.

We will do this by:

- Setting the work programmes of joint commissioners ensuring the alignment of national, regional and local health and social care policies and strategies for vulnerable adults
- Ensuring the delivery of the shared vision and priorities of the HWB through promotion of joint commissioning arrangements and the delivery of integrated care
- Identifying priorities and agreeing structure and resources for the portfolio of programmes within joint commissioning
- Overseeing the management of pooled budgets by their respective lead commissioners eg Better Care Fund, Learning Disability Pooled Fund
- Receiving routine information such as budget reports, financial statements, risk registers, performance indicators
- Receiving reports related to the quality of service provision
- Facilitating communication between the Joint Commissioning Committee, Health and Social Care Integration Board, Health and Wellbeing Board, Council Cabinet, NHS Walsall CCG Governing Body and other stakeholder organisations.

Membership

The membership is shown in the following table:

Role	Agency
Executive Director Adult Social Care & Inclusion (ASC)	Walsall Council (Minimum of 2 to attend)
Group Accountant ASC	
Portfolio Holder	
Chair Accountable Officer	NHS Walsall Clinical Commissioning Group (Minimum of 2 to attend)
Director of Finance	(will ill full of 2 to attend)
Director Service Redesign and Transformation	
Director of Integrated Governance and Organisational Development	
Head of Joint Commissioning	Walsall Council and NHS Walsall CCG
Director of Public Health	Walsall Council

Chair

The Chair of the JCC will alternate at 6-monthly intervals between Walsall Council and NHS Walsall CCG.

Quorum

The quorum will consist of a minimum of two members each from the Council and the CCG.

Reporting

The JCC will report to the Health and Wellbeing Board.

The JCC is constituted as a sub-committee of the Governing Body within the CCG and reports to the Executive Director Management Team of the Adult Social Care and Inclusion Directorate of Walsall Council.

Frequency of meetings

Bi-monthly and at any extraordinary meetings agreed by the Partners.

Review

These Terms of Reference will be reviewed annually.

Resolutions

In the case of failure to agree a resolution the final decision /course of action will be determined between the Accountable Officer of NHS Walsall CCG and the Chief Executive Officer of Walsall Council.