

Health and Wellbeing Board

Monday 30 October 2017 at 6.00 p.m.

in a Conference Room, Council House, Walsall

Membership: Councillor Robertson (Chair)

Councillor P. Bott

Councillor D. Coughlan Councillor A. Ditta

Councillor James
Councillor Martin
Councillor Shires
Councillor Washbrook

Ms. P. Furnival, Executive Director Adult Services Ms. E. Ioannides, Interim Director Children's Services

Dr. B. Watt, Director of Public Health

Dr. A. Rischie Prof. S. Brake

Dr. C. Lesshafft] Clinical Commissioning Group

Mr. P. Tulley | representatives

Mr. M. Abel

Mr. S. Fogell, Healthwatch Walsall

Mr. D. Baker, West Midlands Fire Service Chief Supt. J. Clews, West Midlands Police

Mr. A. Boys, "One Walsall"

NHS England

Quorum: 7 members of the Board

Memorandum of co-operation and principles of decision-making

The Health and Wellbeing Board will make decisions in respect of joined up commissioning across the National Health Service, social care and public health and other services that are directly related to health and wellbeing, in order to secure better health and wellbeing outcomes for the population of the Borough, and better quality of care for all patients and care users, whilst ensuring better value in utilising public and private resources.

The board will provide a key form of public accountability for the national health service, public health, social care for adults and children, and other commissioned services that the health and wellbeing board agrees are directly related to health and wellbeing.

The Board will engage effectively with local people and neighbourhoods as part of its decision-making function.

All Board members will be subject to the code of conduct as adopted by the Council, and they must have regard to the code of conduct in their decision-making function. In addition to any code of conduct that applies to them as part of their employment or membership of a professional body. All members of the board should also have regard to the Nolan principles as they affect standards in public life.

All members of the board should have regard to whether or not they should declare an interest in an item being determined by the board, especially where such interest is a pecuniary interest, which an ordinary objective member of the public would consider it improper for the member of the board to vote on, or express an opinion, on such an item.

All members of the board should approach decision-making with an open mind, and avoid predetermining any decision that may come before the health and wellbeing board.

Agenda

- 1. Apologies
- 2. **Substitutions** (if any)
- 3. Minutes 21 August and 11 September 2017
 - Enclosed
- 4. **Declarations of interest**

[Members attention is drawn to the:

- Memorandum of co-operation and principles of decision making and
- The table of specified pecuniary interests

set out on the earlier pages of this agenda]

- 5. Local Government (Access to Information) Act, 1985 (as amended): To agree that the public be excluded from the private session during consideration of the agenda items indicated for the reasons shown on the agenda.
- 6. Health and Wellbeing Board priorities:
 - (a) Priority 2: Improve maternal and newborn health (Includes Task and Finish group infant mortality)
 - Report to follow.
 - (b) Priority 7: Remove unwarranted variation in healthcare 45 mins and ensure access to services with consistent quality Priority 8: Enable those at risk of poor health to access appropriate health care Priority 12: Deliver prevention and intervention through health and care locality delivery model, including development session feedback
 - Report Director of Commissioning, Walsall CCG enclosed.
 - (c) Priority 10: Improve air quality

20 mins

15 mins

• Report to follow.

7. Update for Health and Wellbeing Boards

10 mins

• Report of West Midlands Combined Authority enclosed

8. Work programme

5 mins

Copy to follow

9. **Key promotional messages**

5 mins

Health and Wellbeing Board to identify health messages

10. Date of next meeting

• 11 December 2017