

Shadow Health and Wellbeing Board

25 February 2013

Establishment of Health and Wellbeing Board

1. Summary

To advise the Shadow Health and Wellbeing Board of implementation of regulations to establish a Health and Wellbeing Board as a Committee of the Council.

2. Recommendations

- (1) That the Council be recommended to establish a Health and Wellbeing Board with a remit and terms of reference consistent with the current remit and terms of reference of the existing Shadow Board set out in Appendix to this report.
- (2) That the Council be recommended to agree the membership of the Health and Wellbeing Board as follows:
 - Portfolio holder for Social care and health (or nominee)
 - Portfolio holder for Children's services (or nominee)
 - One member of the controlling group to be Chairman
 - 2 Labour group nominees
 - 1 Liberal Democrat group nominee
 - Executive Director of Adult Social Services
 - Executive Director of Children's Services
 - Interim Director of Public Health
 - Clinical Commissioning Group representative(s) (representative from each Consortium)
 - Executive Director for Neighbourhoods
 - A representative of NHS Walsall (until abolished)
 - A representative of HealthWatch

3. Report detail

- 3.1 The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 come into force on 1 April 2013.
- 3.2 The regulations as they are to be implemented, do not require any changes to be made to the current membership, remit or terms of reference of the Shadow Board with the exception that HealthWatch will replace representatives from the voluntary sector, LINKs and MY NHS Walsall.

- 3.3. For clarity, the regulations do not require the new Board to be politically balanced, removes restrictions which would prevent local authority officers from being members of Health and Wellbeing Boards and allows all members of the Health and Wellbeing Board to vote unless the local authority directs otherwise.

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Shadow Health and Wellbeing Board - Remit

Interim Remit

- Drive forward integration and partnership working between the NHS, social care, public health and other local services
- Improve accountability of Social and healthcare to the public
- Through strong oversight, ensure that agencies deliver better health and wellbeing for children and adults in Walsall
- Hold all agencies to account in ensuring high quality of care across all sectors,
- Continuously assess value for money in service delivery across the health and care sector
- Eliminate duplication of resources by holding services to account for working together effectively and efficiently
- Hold Commissioners accountable to ensure identification of gaps in service provision through Commissioning and Market Development Strategies
- Agree priorities for the benefit of patients and taxpayers, informed by local people and neighbourhood needs.

Interim Terms of Reference

Members of the Health and Well Being Board shall:

1. Provide collective leadership that creates a culture of and the environment for transformational change across the health and care sector
2. Drive improvements in the health and well-being of Walsall's population, and thus reduce inequalities.
3. Drive integration and partnership working, by holding Commissioners and Providers to account for the development and delivery of coherent commissioned outcomes between the NHS, social care, public health and other local services.
4. To ensure that needs of Walsall's population are assessed effectively through production of the Local Joint Strategic Needs Assessment (JSNA).
5. Commission the development of the Joint Health and Wellbeing Strategy (JHWS) for Walsall, which will result in practical improvements in health and well being for the people of Walsall, by reflecting the broader health determinants, for example, housing and education.

6. Hold Commissioners accountable for the informed commissioning of services that are based upon the overall needs of the population going forward and reflect the aims of the JSNA and JHWS.
7. Make recommendations, as appropriate, to other bodies, pertaining to the improvement of health and wellbeing.
8. **Support** joint commissioning and pooled budget arrangements as a means of delivering service priorities, hold respective organisations to account through regular reports on associated activity.
9. To receive, as requested, reports from other partnership bodies, including Mental Health, Older People's, Learning Disabilities, Children's, Safeguarding Boards for Children's and Adults, GP Commissioning Consortium and other bodies or services that may be established to promote partnership working.