

Health and Wellbeing Board

28 April 2014

Health and Wellbeing Board – membership

1. Purpose

This report gives the Board an opportunity to consider its composition and discuss whether there are any gaps or areas where the inclusion on the Board of other organisations would add value to the Board's work.

2. Recommendation

The views of members of the Health and Wellbeing Board are sought on its composition in order to inform members of the Board in the new municipal year.

3. Report detail

3.1 In accordance with the Health and Social Care Act 2012 (the Act) and the Local Authorities (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (the Regulations), the Council established a Health and Wellbeing Board in April 2013 with a remit and terms of reference attached as **Appendix 1** to the report.

3.2 Section 194(2) of the Act states that the membership of the Board should consist of:

- (a) at least one councillor of the local authority
- (b) the director of adult social services for the local authority
- (c) the director of children's services for the local authority
- (d) the director of public health for the local authority
- (e) a representative of the Local Healthwatch organisation for the area of the local authority
- (f) a representative of each relevant clinical commissioning group, and
- (g) such other persons, or representatives of such other persons, as the local authority thinks appropriate.

3.3. The Regulations do not require the Board to be politically balanced, removes restrictions which prevent local authority officers from being members of the Board and allows all members of the Board to vote unless the local authority directs otherwise.

3.4 In establishing the Board, the Council decided the membership to be as follows:

- 2 Conservative group nominees (one to be Chair)
- 3 Labour group nominees
- 1 Liberal Democrat nominee
- Executive Director of Adult Social Services
- Executive Director of Children's Services
- Director of Public Health
- 5 Clinical Commissioning Group representatives
- Executive Director for Neighbourhoods
- A representative of Healthwatch
- 1 independent member of the Council

3.5 Since then a number of requests for representation on the Board have been received and which have been reported to the Board:

- West Midlands Fire Service (letter attached at **Appendix 2**)
- West Midlands Police – verbal request
- Walsall Voluntary Action (letter attached at **Appendix 3**)
- Walsall Housing Partnership (information attached at **Appendix 4**)
- Walsall College – verbal request

In considering the requests, members were of the view that the Board should continue with the existing membership but that this be reviewed for the next municipal year. In the meantime, existing mechanisms for engaging those organisations would be used.

3.6 Section 194 of the Act states that:

- (8) The Health and Wellbeing Board may appoint such additional persons to be members of the Board as it thinks appropriate.
- (9) At any time after a Health and Wellbeing Board is established, a local authority must, before appointing another person to be a member of the Board under subsection (2)(g), consult the Health and Wellbeing Board .

3.7 It is appropriate that any changes to the membership should be made by the members of the Board at the first meeting in the new municipal year. Therefore, the views of the current board members are sought in order to inform future decisions.

Author

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Committee Business and Governance Manager

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Walsall Council

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.

WEST MIDLANDS FIRE SERVICE

Fire Service Headquarters,
99 Vauxhall Road, Birmingham B7 4HW

www.wmfs.net

Mick Birch
Walsall Operations Command, Walsall Fire Station, Blue Lane West,
Walsall WS2 8NU

Date 12th June 2013
Your Ref
Our Ref MB
Tel No 0121 380 7751
Please ask for Mick Birch

CHIEF EXECUTIVE'S OFFICE WALSALL COUNCIL	
Received	17 JUN 2013
	copy Helen Owen
REFER TO	Ruby

Dear Paul,

I am writing to inform you of the excellent work West Midlands Fire Service undertakes in Walsall with regard to vulnerable people and the health agenda as a whole. This is with a view to gaining a seat on the Health and Wellbeing Board. It has been a firm belief of mine for some time that West Midlands Fire Service should take a lead role around this agenda as we are one of the few community facing partners that the public are happy to welcome into their homes and properties. To my disappointment, we have been omitted from the Board while under the NHS but now that this has been transferred to Walsall Council I am keen to seek your approval to have a seat at Board level so we can support and influence the direction of travel of this important group and thus the health and wellbeing of the Walsall residents that we serve.

I have listed a selection of projects below that show the level of commitment that we have put towards protecting Walsall residents and 'Keeping the West Midlands Safe'.

Projects:-

- Walsall has 12 Vulnerable Persons Officers (VPO's) – uniformed and non uniformed staff trained to deliver extra levels of care to vulnerable people and equipped with additional equipment than a normal fire fighter.
- Making Every Contact Count – All watches have received Healthy Lifestyle Training that allows them to undertake brief intervention conversations with members of the public around topics such as smoking cessation, alcohol and drug use, exercise and diet and mental health wellbeing.
- Walsall Hub – West Midlands Fire Service has project managed and delivered the Walsall Hub for agencies to refer directly to one and other quickly, easily and securely with the added bonus of the being able receiving partner to provide feedback of action taken.
- Walsall Community Alarms – for the past two years West Midlands Fire Service has installed Walsall Community Alarms as part of its Home Safety Check.
- Hearing Impaired Support – West Midlands Fire Service has a dedicated team of people that are British Sign Language qualified that can delivery fire safety information to people that deaf or hard of hearing. This is quite pertinent as I'm sure you are aware that Walsall has

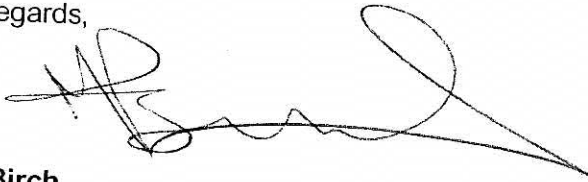
one of the highest populations of deaf communities in the country.

- Special Education Needs – As part of our targeted youth work we have a number of fire fighters that are trained to deliver fire safety information to people with special education needs.
- Cycle Team – Walsall Community Cycle Team can deliver Bike-ability Level 1
- MASK – Several fire fighters are trained in Multi-Activity Sport Club a schools based project that teaches young people how to be active in a non-competitive way and the value of a nutritious diet.

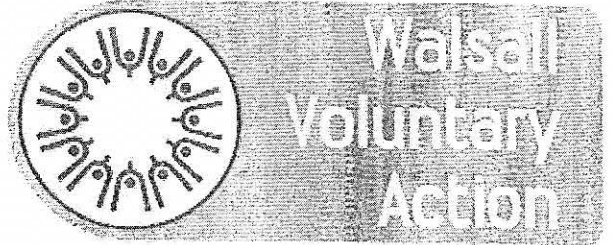
This is not an exhaustive list, but I believe it demonstrates our commitment to diversifying our service delivery to take account of the Health & Wellbeing Agenda

I look forward to your response and please do not hesitate to contact me regarding this matter.

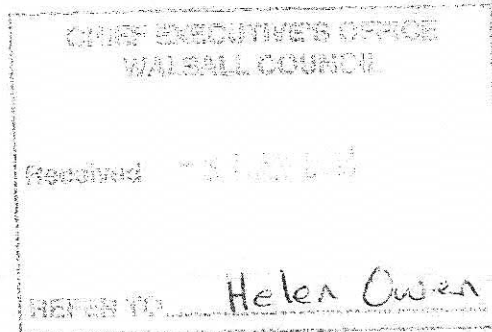
Best regards,

A handwritten signature in black ink, appearing to read 'Mick Birch', with a large, stylized flourish extending to the right.

Mick Birch
Walsall Operations Commander



Mr Paul Sheehan
Chief Executive
Walsall Council
The Civic Centre
Walsall
WS1 1TP



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1st March 2013

Dear

I am writing on behalf of the Trustee Board of Walsall Voluntary Action (WVA) to express our concern about WVA's representation on the Walsall Health and Wellbeing Board (HWB). As an organisation we were represented on the HWB during its shadow and set up stage and we are keen to retain this status from April 2013 as HWB gains its statutory status with Walsall Council.

Key elements of the vision of the Walsall HWB are to:

- Encourage collective leadership to integrate services and better meet local health and wellbeing needs;
- Encourage genuine collaboration between organisations involved in the Health and Wellbeing arena – including the voluntary sector;
- Connect health provision with the wider public and community sector;
- Provide "added value" by engaging the public, re-align resources and sharing priorities and tangible outcomes.

WVA are uniquely placed to provide the representational and facilitating role for Walsall HWB to both meet their vision and ensure "added value". As an organisation we:

- Facilitate, advise and support over 600 large and small scale voluntary and community sector organisations throughout Walsall, providing us with a strategic overview of the operational requirements of the voluntary sector and how this can be fed into the development of the Walsall HWB;
- Have direct contact with voluntary and community organisations who contribute significantly to the advancement of the health and wellbeing agenda in Walsall;
- Are in a position to disseminate information and organise the practical and strategic input of these organisations for the advancement of the Walsall HWB.

Could we please arrange to discuss this issue as a matter of urgency. Could you please either contact me or my Chief Executive Officer Mr Tim Marren on the contact information supplied with this letter.

I look forward to your response.

Yours sincerely,

Carl Rice

Chair Walsall Voluntary Action

The Housing Association Impact on Health & Wellbeing

Introduction:

Walsall Housing Partnership (WHP) is a well-established mechanism bringing together the key housing associations that operate within the Walsall Borough. Just under a third of all households live in accommodation provided by a housing association and we also provide a vast range of care and support services that enable people to live independently whilst coping with health or social care issues. It is worth remembering that the member associations are not for profit organisations and the two largest have their roots in Walsall and exist for the benefit of the communities we serve.

Prior to 2012, WHP took a lead role within the prevention services strategy group and we were looking forward to having an even more positive impact on health & wellbeing as the responsibility for public health moved back into the remit of the local authority. In autumn 2012, WHP established a health & wellbeing sub group to replace the feedback mechanism for the former prevention services group. The purpose of this paper is to provide a brief summary of the reasons we believe it is essential that the social housing movement is represented within the Health & Wellbeing Board for Walsall

1 – Early Diagnosis

We are in an ideal position to promote early diagnosis of symptoms that have the potential to develop into major issues that will adversely impact on the resources of our health care structure within Walsall. We represent the landlord for c60,000 residents and have regular and routine contact with these families – of which approximately 70% live in the super output areas of multi-deprivation in the borough. In addition to this we provide support services for over 5,000 people who already have specific vulnerabilities so that they can maintain independence within their own homes.

Many of our employees are already trained in safeguarding issues and we have the scope to build on this giving us the ability to help identify early warning signs and connect people to the appropriate health care while a wider range of cost effective treatments is available.

2 – Early Intervention

Our members already provide preventative interventions and therapies that help people cope with illness at a more manageable stage thus preventing a significant proportion of people going on to suffer a more acute form of the illness costing considerably more to treat. One example of this is the support services we provide to people recovering from mental and stress related illness. We also promote a range of wellbeing services within the community that help to build up the overall resilience within a community to provide low level support or low cost distraction activities.

3 – The Home as a Hub for Services

The importance of safe, warm and affordable homes as the basis for healthy lifestyles cannot be ignored and there is a huge amount of statistical evidence available to support this claim. It is also well established that most people would choose the home as the best place to receive treatment and support where hospital treatment is not essential. We believe that our representation on the

Health & Wellbeing Board will enable an expansion of cost effective home treatments and will enable us to factor in health care options in the homes we build or modify. Families are the fundamental structures that support positive growth, development and wellbeing in society and families can only function effectively when a warm safe and stable home is available within a safe area where people choose to live.

4 – Affordable warmth & Tackling Poverty

It is no coincidence that the link between poverty and poor health is so strong and as social housing providers we play a major role in alleviating the effects of poverty and enabling people to access affordable warmth. If we take just one example, Housing programmes could deliver vast improvements in the UKs poor record for excessive winter deaths. *The number of fuel poor households dramatically increased between 2004 and 2010 from 1.2 million to 4.6 million. With rising fuel prices since that point the situation is now undoubtedly much worse. The Marmot review (2010) found evidence of the impacts of fuel poverty on mortality, morbidity and other social impacts – and countries which have more energy efficient housing have lower excess winter deaths.* It therefore follows that members of the Walsall Housing Partnership have a significant role if we are to improve the mortality rate related to lack of affordable warmth.

We are also aware that residents within our more deprived areas have a poorer diet and less healthy lifestyle than those in the more affluent parts of the borough. Our work with residents in these areas focusses on all aspects of their life journey whether from “welfare to work” or from “poor health to wellbeing”

5 – Community Connections & Resource

The main housing associations in Walsall have a genuine commitment to resident engagement and community empowerment putting considerable resource into the development of communities and helping to build a more compassionate society. This aspect of our work in Walsall will complement the role of the Health & Wellbeing Board in making our poorest communities more resilient, self-sufficient and sustainable. There is a well-established link between poor health and low self-esteem and we have a range of local interventions with a proven track record in raising the sense of self-worth for our clients by encouraging them to volunteer and contribute to the communities that ultimately support them. We should not overlook the fact that we represent the employers of c 3000 people within the Walsall Borough and we operate healthy work places and can be a positive influence on their wellbeing.

6 – Co-ordinating hospital discharge

We are aware that health care resources are often tied down unnecessarily because it is not easy to make suitable discharge arrangements for patients who need to convalesce in a home environment. We believe our members can work with the Health & Wellbeing Board on this to provide some innovative partnership solutions

Conclusion

WHP has a great deal to offer through membership of the Health & Wellbeing Board and it makes sense that we should be involved at this strategic level. This summary has been deliberately curtailed to 2 sides of A4 but other more detailed information has been forwarded along with the relevant references and supporting evidence

Mike Hew

Chair of the Health & Wellbeing sub group, Walsall Housing Partnership