

Report to Scrutiny

Item Number: 7

Contains Confidential or Exempt Information

No

Subject of Report: Health & Wellbeing Board

Meeting: Scrutiny Review Panel 1 - Governance
26th September 2013

Service Report Authors: Keith Fraser, Head of Scrutiny & Committees
fraserk@ealing.gov.uk
0208 825 7497

Scrutiny Officer: Harjeet Bains
Scrutiny Review Officer
Email: bainsh@ealing.gov.uk
Tel: 020-8825 7120

Cabinet Responsibility: Councillor Julian Bell
(Leader of the Council and Policy Overview Portfolio)

Director Responsibility: Helen Harris
Director of Legal & Democratic Services
harrish@ealing.gov.uk
Tel: 020 8825 8156

Brief: To review the current governance arrangements of the Board in conjunction with the role of the Health and Adult Social Services Scrutiny Panel and make recommendations accordingly.

Recommendations: It is recommended that the Panel notes the way the HWB operates and make proposals for further improvement if necessary

1. HWB

- 1.1 The Council was required, under the Health & Social Care Act, to set up a formally constituted Health & Wellbeing Board (HWB). This replaced the partnership bodies that had been previously in existence though Ealing, like many other authorities, had been operating the HWB in Shadow Form during the last municipal year. In April Council formally constituted the Board and its membership.
- 1.2 The HWB has had two meetings and is slowly developing its operating practices. For example, the second meeting restructured the agenda to identify specially- items for decision, items of strategic interest and items for information. They also have agreed Terms of Reference (TOR), attached as **Appendix 1**.
- 1.3 It is worth noting that the LGA published, in early September a “Health and wellbeing board development tool”¹ an updated version of a tool originally produced some while ago. The page on Governance is shown in **Appendix 2**
- 1.4 **Health Scrutiny**
- The Health & Social Care Act also gave Councils greater flexibility in the way they operated Health Scrutiny with the key power of referral to the Secretary of State. This power was given to Full Council meetings; Ealing, along with many other authorities, promptly delegated this power to the Health and Adult Social Services Scrutiny Panel (HASS).
- 1.5 Given that this left the Council with two bodies looking at related issues it is important that they play their respective roles without duplication or omission. While this relationship is at an early stage it already follows some key principles:
- Reports should not automatically go to both bodies- neither HASS automatically pre-scrutinising HWB report or HASS receiving HWB reports.
 - However this does not preclude either body involving the other should it be an appropriate issue
 - Both bodies publishing Forward Plans will enable members to identify items of interest
 - HASS will scrutinise the work of HWB annually, via an update report. -

2. Legal Implications

- 2.1 The general scrutiny functions and powers and specific role of the Panel and

¹ http://www.local.gov.uk/web/guest/health/-/journal_content/56/10180/3638628/ARTICLE

the HWB are set out in the Council Constitution.

3. Financial Implications

- 3.1 There are no direct financial implications arising from this report. Support to the Scrutiny Panel is contained within the allocated budget. Value for money will come from the Panel having a well-constructed work programme with each topic for scrutiny having a considered brief and identified outcomes.

4. Other Implications

- 4.1 There are no other implications arising from this report.

5. Background Papers

- 5.1 Ealing Council's Constitution, available at www2.ealing.gov.uk/services/council/council_constitution/.

Consultation

Name of Consultee	Department	Date Sent to Consultee	Date Response Received from Consultee	Comments Appear in Report Para:
Internal				
Helen Harris	Director Legal & Democratic Services	11/9/13	12/9/13	
Cllrs Young & Gordon	Chair & Vice-Chair	29/8/13	3/9/13	
Dr Bal Kaur	Director Public Health	16/8/13	11/9/13	
External				
None				

Report History

Decision Type:			
Non-key decision		No	
Authorised by Cabinet Member:	Date Report Drafted:	Report Deadline:	Date Report Sent:
Report No.:	Report Author and Contact for Queries:		
	Keith Fraser, Head of Scrutiny & Committees fraserk@ealing.gov.uk 0208 825 7497		

Appendix 1



The Health & Wellbeing Board

2013/2014

TERMS OF REFERENCE

INTRODUCTION AND BACKGROUND

These terms of reference set out how the Health & Wellbeing Board will operate and its roles and responsibilities.

The Health & Wellbeing Board will aim to improve the health and wellbeing of the residents of Ealing and reduce current inequalities in outcomes.

The Board will provide collective leadership to improve health and wellbeing and enable shared decision-making and ownership of decisions in an open and transparent way.

The Board will address health inequalities by ensuring quality, consistency and comprehensive health and local government services are commissioned and delivered in Ealing.

It will lead on improving the strategic coordination of commissioning across NHS, social care, and related children's and public health services.

It will bring together the key Council, NHS, public health and social care leaders in Ealing to work in partnership.

POWERS

The **Functions** and **Roles** of the Health & Wellbeing Board, as set out in the Council constitution, are:

1. To encourage people who arrange for the provision of any health or social care services to work in an integrated manner for the purpose of advancing the health and wellbeing of the people in the area
2. To encourage people who arrange for the provision of any health-related services in the area to work closely with the Health and Wellbeing Board and/or with people who arrange for the provision of any health or social care services.
3. To exercise the functions of the Council and the Clinical Commissioning Group ("CCG") in relation to the preparation of a Joint Strategic Needs Assessments ("JSNA") and Joint Health and Wellbeing Strategies ("JHWBS")
4. To give an opinion on whether the council is discharging its duty to have regard to the JSNA and JHWBS
5. To consider the CCG's commissioning plan and any revision of it and to give an opinion to the CCG on whether the plan takes proper account of the JHWBS and to give the NHS Commissioning Board a copy of the opinion
6. To consider the CCG's annual report and to give the NHS Commissioning Body its views on the CCG's contribution to the delivery of the JHWBS
7. To undertake or oversee the production of pharmaceutical needs assessments.

8. To undertake any other functions of a health and wellbeing board which may from time to time be specified by legislation or recommended by the Government as best practice for health and wellbeing boards

The Council and Committee Procedure Rules (see Constitution) shall apply to Health & Wellbeing Board.

These are:

Rules 5 (notice and summons to meetings), 6 (chair of meeting), 8.5 (operating on the basis of 2/3 of the committee members), 14.4 (only one member to stand at a time), 14.2 (Right to require notice in writing), 14.13 (points of order), 14.14 (personal explanation), 14.15 (respect for chair), 16 (voting), 17 ((minutes), 18 (record of attendance), 19 (exclusion of public), 20 members' conduct), 21 (disturbance by public), 22 (filming), 23 (committees), and 28 (interpretation of rules of procedure). The Regulations provide that all Members of the Board and any subcommittee may vote unless the council directs otherwise following consultation with the Board.

AREAS COVERED BY HEALTH & WELLBEING BOARD

To provide strategic and organisational leadership in developing the Health and Wellbeing Strategy vision for health, adult and children's social care

To assess the needs of the local population and lead the statutory Joint Strategic Needs Assessment

Ensure that all relevant partners have regard to the JHWS and JSNA when exercising commissioning functions

Develop solutions to complex challenges outlined in the JSNA and JHWBS

To promote integration and partnership across areas, including through promoting joined up commissioning plans across the NHS, social care and public health;

To support joint commissioning and pooled budget arrangements, where all parties agree this makes sense;

Partners will work together to jointly agree the best use of resources, their mobilisation and coordination to deliver agreed priorities.

Review performance against key outcome indicators and be collectively accountable for outcomes and targets specific to performance frameworks within the NHS, Local Authority and Public Health.

Individual cases will not be considered by the Health and Wellbeing Board.

MEMBERSHIP

The membership for 2013/2014 is:

Role / Position	Name	Substitute
Chair –Leader of the Council	Cllr Bell	Any Councillor as per the constitution
Vice Chair- The Portfolio Holder for Adults and Health	Cllr Walker	
The Portfolio Holder for Childrens Services	Cllr Anand	
The Shadow Member for Health and Adult Services	Cllr Stafford	
The Executive Director of Children and Adults (in his capacity as the council's statutory director of adult social services and director of children's services)	David Archibald	Stephen Day
The Director of Public Health	Dr Jackie Chin	Dr Bal Kaur
A representative of the Local Healthwatch organisation	Carmel Cahill	
Chair of the clinical commissioning group	Dr Mohini Parmar	
Vice Chair of the clinical commissioning group	Dr Raj Chandok	
Accountable Officer clinical commissioning group	Rob Larkman	
Acting CEO The North West London Hospitals NHS Trust	David McVittie	
Chief Executive West London Mental Health Trust	Steve Shrubbs	
Acting Deputy CEO The North West London Hospitals NHS Trust	Dr William Lynn	
Representative of Ealing Community Network	Andy Roper	Antony Beswick - Smith
A representative of the NHS Commissioning Board –NHS England (when required)	Alex Gordon	Karen Clinton

PARTNER INVOLVEMENT IN THE WORK OF THE BOARD

The Health and Wellbeing Reference Group which brings together key partners to inform the strategy, decisions, work and performance management arrangements of the HWB.

The following Partnership Boards will also perform a consultative and advisory role:

.Learning Disability Partnership Board

Older Persons/Long Term Conditions Partnership Board

Mental Health Partnership Board

Safeguarding Adults' Partnership Board

Carers Partnership Board

Drug and Alcohol Task Group

Children and Young People Board

OTHER EXTERNAL INVOLVEMENT IN THE WORK OF THE BOARD

All meetings will be held in public and there is always seating available for observers. Participation in the meeting is entirely at the discretion of the Chair and members of the public have no speaking rights.

However if there was a particular issue where they wanted to make a contribution they should contact the committee administrator well in advance of the meeting.

KEY CONTACTS

- Corporate Board – Chief Executive and Executive Directors
- Cabinet
- Shadow Cabinet
- Leader of the Liberal Democrat Group

Officer support for the Health & Well-Being Board

Committee administrator

Laurie Lyle Lylel@ealing.gov.uk 0208 825 7380

Head of Scrutiny & Committees

Keith Fraser fraserk@ealing.gov.uk 0208 825 7497

July 2013

Appendix 2

Type	Activity
<p>Young HWB</p>	<p>HWB membership, governance, operational structures, scheme of delegation and mechanisms for engaging partners are clear, transparent and accessible to the public. Partners are clear about their individual and collective roles, responsibilities and accountabilities.</p> <p>The HWB understands its accountabilities in relation to other partnerships. HWB accountabilities are incorporated into partner governance arrangements</p> <p>The HWB has dedicated and skilful officer support, available to all members of the HWB.</p> <p>The HWB has an agreed set of outcome measures, matched to its priorities.</p> <p>Local Healthwatch is empowered to act as an independent and effective voice for users, communities and the public.</p> <p>The relationship between scrutiny and external regulators is agreed and an initial effectiveness review has been completed.</p>
<p>Established HWB</p>	<p>A clear framework exists for deciding on contentious issues. Decisions of the HWB are accepted and acted on by all member organisations.</p> <p>HWB partners are able to have honest discussions about budgets and financial positions.</p> <p>The HWB invites peer scrutiny and works constructively with regulators and scrutiny bodies. The HWB reviews itself regularly against benchmarks and adapts plans as necessary.</p> <p>The HWB receives regular and timely updates on progress against indicators and takes corrective action if necessary.</p> <p>The HWB can demonstrate it has considered and acted upon</p>

	<p>the views of local people, feedback obtained from the community and evaluation of citizen experience.</p> <p>The HWB seeks assurance on progress towards integrated care</p>
Type	Activity
Mature HWB	<p>The wider system understands how the HWB and related structures operate.</p> <p>Reporting and governance is evaluated across partners and streamlined where appropriate.</p> <p>Systems are in place to ensure decisions result in direct action across the partnership.</p> <p>Resources are pooled where appropriate, whether in back office functions or integrated commissioning, with good governance.</p> <p>Barriers to achieving priorities are identified and reviewed, and plans are in place to overcome/minimise these.</p> <p>The HWB regularly demonstrates and communicates its achievements of outcomes.</p> <p>Whole system safeguarding mechanisms are in place, including accountabilities.</p>
Exemplar HWB	<p>Integrated decision making, commissioning and governance are the 'norm' for the HWB.</p> <p>The HWB has an integrated 'whole system' (rather than individual organisation measures) outcomes framework of high level indicators, supported by a 'dashboard' across the health and wellbeing system.</p> <p>Budget planning is open and resources are directed to support agreed priorities and improvements for local communities.</p> <p>Risk sharing agreement exists between the LA, CCGs and other relevant partners.</p>

Extract from LGA HWB Improvement Tool – Page 7 “Governance, Risk

sharing and assurance of outcomes.