

Wiltshire Council

Health and Wellbeing Board

21 November 2013

Governance of Health and Wellbeing in Wiltshire

Executive Summary

Wiltshire's Health and Wellbeing Board has a number of important relationships with other governance structures, including the Council, Safeguarding Boards and joint commissioning boards for adults and children's services.

Proposal(s)

It is recommended that the Board:

- i. notes the current arrangements governing Health and Wellbeing in Wiltshire and formally endorses them

Reason for Proposal

It is important that all partners have a shared understanding of the role of different boards responsible for aspects of Health and Wellbeing.

The last year has seen significant changes in governance and this paper provides a summary of the current roles of the various boards.

The current arrangements were endorsed by the Health and Wellbeing Board when in shadow form and this paper invites formal endorsement of these now the Board is formally constituted.

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Wiltshire Council

Wiltshire Council

Health and Wellbeing Board

12 September 2013

Governance of Health and Wellbeing in Wiltshire

Purpose of Report

1. To provide a reminder of current arrangements governing Health and Wellbeing in Wiltshire and set out the relationship of the Health and Wellbeing Board with other governance structures.

Background to the establishment of the Health and Wellbeing Board

2. Under the Health and Social Care Act 2012 the Council is required to appoint a Health and Wellbeing Board that works with partners, including GPs, to prepare a health and wellbeing strategy for the Council and to ensure that the commissioning of services is integrated. As the regulations were not issued until mid-February with guidance issued even more recently, combined with the elections in May, it was decided to wait the annual meeting of Council in May to formally appoint the board. Following this, the first meeting of the Health and Wellbeing Board took place in September.
3. The Board is regarded as an ordinary committee of the Council –appointed by the Council, reporting to the Council, with its membership agreed by the Council. Accordingly its proceedings are publicly accessible and its agenda and reports appear on the Council's website along with all other committees. Its voting members are also subject to the Council's code of conduct.

Membership of the Health and Wellbeing Board

4. There are exceptions to the Board being regarded as an ordinary committee of the Council in that key areas of traditional legislation have been modified on Membership of the Board as follows:-
 - the requirements of political proportionality are disapplied by the regulations and the Council can choose to appoint any councillors that it wishes;
 - officers are allowed to be members of the Board;
 - all members of the Board are permitted (including officers, GPs) to vote unless the Council directs otherwise.
5. The Health and Social Care Act also lays down minimum statutory membership of the Board. It requires that the councillor membership is nominated by the Leader of the Council in councils which are operating executive arrangements. Representatives of the Clinical Commissioning Group (CCG), NHS England and Healthwatch are to be appointed by those

respective organisations. Bearing this in mind the Council agreed that membership of the Board would be as follows:

Voting members

- The Leader of the Council
- Wiltshire Council Cabinet representatives with responsibility for Children, Adults and Public Health
- 4 representatives from the CCG
- 1 representative from Healthwatch
- 1 Police and Crime Commissioner (PCC)
- 1 NHS England representative

Non-voting members

- Wiltshire Council officers with statutory responsibility for Children, Adults and Public Health services
- Chief Officer / Chief Finance Officer of the Clinical Commissioning Group
- 3 Acute Hospital Trusts representatives (Salisbury Hospital FT, Great Western Hospital FT and Bath RUH FT)
- 1 South West Ambulance Service (SWAS) representative
- 1 Avon and Wiltshire Mental Health Partnership (AWP) representative
- 1 Wiltshire Police Chief Constable representative
- 1 Member of the Opposition representative
- 1 Wessex Medical Committee representative

Terms of Reference

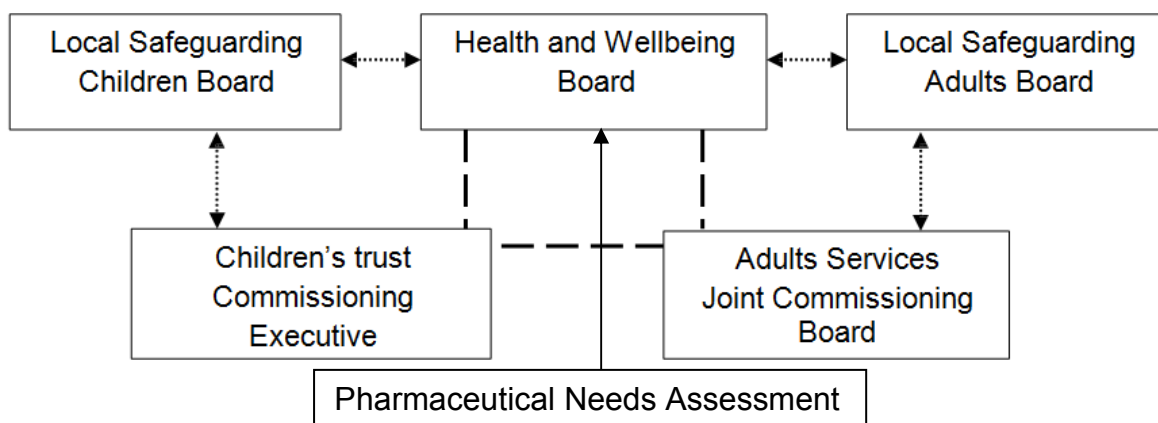
6. A number of principles underlie the creation of Health and Wellbeing Boards and the spirit in which the legislation has been drafted – these include:-
 - shared leadership of a strategic approach to the health and wellbeing of communities that reaches across all relevant organisations;
 - a commitment to driving real action and change to improve services and outcomes;
 - parity between board members in terms of their opportunity to contribute to the board's deliberations, strategies and activities;
 - shared ownership of the board by all its members (with commitment from their nominating organisations) and accountability to the communities it serves;
 - openness and transparency in the way that the board carries out its work;
7. The statutory functions of the Health and Wellbeing Board contained within the Act are:-
 - to prepare Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs), which is a duty of local authorities and clinical commissioning groups (CCGs).
 - a duty to encourage integrated working between health and social care commissioners, including providing advice, assistance or other support to encourage arrangements under Section 75 of the National Health Service Act 2006 (i.e. lead commissioning, pooled budgets and/or integrated provision) in connection with the provision of health and social care services.

- a power to encourage close working between commissioners of health related services and the board itself.
 - a power to encourage close working between commissioners of health-related services (such as housing and many other local government services) and commissioners of health and social care services
8. Councils are being asked to treat Boards as a completely new and unique body, one which has had its functions (as set out in paragraph above) conferred on it directly by statute. Consequently, these statutory functions are the agreed Terms of Reference for Wiltshire's Health and Wellbeing Board. The National Health Service (Pharmaceutical Services and Local Pharmaceutical Services) (Amendment) Regulations 2013 has also established a duty on the Board to undertake Pharmaceutical Needs Assessments.
9. The Act also provides for Councils to delegate any other functions to the Board under section 196(2) of the Health and Social Care Act 2012. This could include, for example, certain public health functions and/or functions relating to the joint commissioning of services and the operation of pooled budgets between the NHS and the council. Such delegated functions need not be confined to public health and social care. Where appropriate, they could also, for example, include housing, planning, work on deprivation and poverty, leisure and cultural services, all of which have an impact on health, wellbeing and health inequalities. The Board is currently concentrating on its core functions and has not sought further delegations from Council.

Accountability and Relationships with Council and other structures

10. The Department of Health are very keen that the Board's proceedings should be conducted in such a way that both the non-councillor membership and the public feel able to engage and participate in an inclusive and welcoming forum. As a committee of the Council, the Health and Wellbeing Board will also report to Council regularly on the business it transacts. This should help to embed its business within the council and aid cross party ownership of the issues with which it is dealing. In particular the Boards are tasked with preparing the JSNA and JHWS and when consulting on these will wish to include partner organisations as part of this process.
11. The work of the Health and Wellbeing Board may be subject to scrutiny although its decisions are not subject to call-in. It may wish to work with Overview and Scrutiny (the Health Select Committee) to develop particular areas of work that it is focussing on. Conversely the Health Select Committee will be working closely with the Health and Wellbeing Board to ensure its work programmes are aligned.
12. There are also broader relationships within the Council with other structures. Both the commissioning of services for adults and children will work as advisory sub groups of the Board and whilst these are not formally accountable to the Board the commissioning arrangements will be brought together at Board level through joined up reporting arrangements. Likewise

the safeguarding responsibilities of the Council are performed through the respective multi agency Safeguarding Boards for Adults and Children. Whilst again the governance of these Boards will be separate they will have a critical relationship with the Health and Wellbeing Board which will be both mutual and complementary. These relationships are described in the structure chart below.



Pharmaceutical Needs Assessment

13. A working group has also been established to deliver a refreshed Pharmaceutical Needs Assessments, as agreed at the last meeting of the Health Wellbeing Board. This will be reporting to the Board on its work ahead of public consultation in summer 2014 and, following consultation, early in 2015.

Joint Commissioning Board for Adults Services

14. A wide range of activity on Adults Services between Wiltshire Council and the Clinical Commissioning Group has been underway for some time. This includes the ongoing development of a shared evidence base; the production of a Joint Business Agreement; a joint action plan for the reduction of delayed transfers of care; joint commissioning and pooled budget for carers services; joint commissioning of STARR step-up and step-down beds; A joint action plan in response to Winterbourne View recommendations; and the work on the transformation of Community Services.
15. In order to make jointly agreed recommendations for change to the two commissioning organisations, a Joint Commissioning Board (JCB) for Adults Services was suggested to act as an advisory body at a facilitated workshop of Council and CCG representatives in February 2013. Following this, the Terms of Reference for the Joint Commissioning Board were endorsed by the shadow Health and Wellbeing Board at its meeting in April and are included at **Appendix 1**. The JCB held its first meeting in July 2013. Now the Health and Wellbeing Board is formally constituted it is again invited to reiterate its support for the arrangements.
16. To mirror the arrangements for Children's Trust Commissioning Executive

there is currently a proposal to include a councillor representative on the JCB.

Children and Young People's Trust Commissioning Executive

17. Although it is no longer a requirement to have a Children's Trust Board, recent Government guidance on the Department for Education website notes that: "All evidence and experience suggests stronger partnerships, greater integration of services and a shared purpose for all those working with and for children and families lead to better services for children, young people and families –especially the most vulnerable. The core principle of a shared commitment to improve the lives of children, young people and families – enshrined in the 'duty to cooperate' on local strategic bodies – remains as important as it ever was."
18. The aim of the revised Children's Trust governance arrangements is to lead to more involvement of agencies working with children and young people and to a stronger focus on commissioning. This will be underpinned by the participation and involvement of children, young people, parents and carers. A diagram setting out the arrangements as January 2012 is included as Appendix 2.
19. The Children and Young People's Trust Commissioning Executive has been established for some time and 8 subgroups focusing on elements of joint commissioning have been established. Current membership is as follows:
 - Cllr Laura Mayes, Cabinet Member for Children's Services
 - Carolyn Godfrey, Corporate Director (Statutory Children's officer)
 - Julia Cramp, Associate Director, Quality Assurance, Commissioning, Performance, Schools and early years
 - Susan Tanner
 - Terence Herbert, Associate Director, Children, Youth, 0-25 SEN/ Disability, Children & Families Social Care
 - Deborah Fielding, CCG
 - Amy Bird, Public Health
 - Neil Baker, Head Teachers
 - Simon Jeffery, Probation
 - John Mullender, Army Welfare
 - Mark Sellers, Police
 - David Bonner-Smith, Voluntary Sector Forum
 - Clifford Turner, Wiltshire Safeguarding Children's Board (Observer)

Safeguarding Boards

20. Wiltshire's Safeguarding Children Board is a statutory board with its terms of reference available [online](#). Some of its core duties include raising safeguarding awareness and contributing to planning and commissioning. It also participates in the Early Intervention Sub Group of the Children's Trust. As such, it is important that the Health and Wellbeing Board and the Safeguarding Children Board inform each other's activities.

21. Wiltshire also supports a Safeguarding Adults Board ([SAB](#)). The Care Bill proposes to place this on a statutory basis equivalent to Children's Safeguarding Boards, for the first time. Amongst other things, the Bill says that the SAB must:
- Include representatives of the council, CCG and police;
 - develop shared plans for safeguarding, working with local people to decide how best to protect adults in vulnerable situations (including consulting Local Healthwatch);
 - publish this safeguarding plan and report to the public annually on its progress (including to the Health and Wellbeing Board), so that different organisations can make sure they are working together in the best way.
22. Clearly, it is important that the Health and Wellbeing Board and the Safeguarding Adults Board continue to inform each other's activities. This includes taking the SAB Annual Report to the Health and Wellbeing Board again this year. This will be an important future relationship with the two bodies needing a strong relationship to account for their activities in safeguarding adults at risk. All SAB member agencies will be asked to present the Annual Report to their own Board or equivalent body as well.

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8 November 2013

Background Papers

Published documents:

Paper on the appointment of the Health and Wellbeing Board, Annual Council, May 2013.

No unpublished documents have been relied on in the preparation of this report.

Appendices

Appendix 1 – Terms of Reference for the Joint Commissioning Board for Adults Services

Appendix 2 – Children's Trust Governance and the role of the Commissioning Executive

Joint Commissioning Board Terms of Reference

1. Duration

The terms of reference apply to Year 1 arrangements for the Joint Commissioning Board (JCB) and will be reviewed prior to the commencement of Year 2.

2. Purpose of the JCB

2.1. In year 1, the JCB will act as an advisory body to the two commissioning organisations, making jointly agreed recommendations for change.

2.2. The JCB will build on a shared vision for the commissioning and development of services, taking into account:

- Local needs and local priorities, as set by the Wiltshire Health and Wellbeing Board through the JSA and the Joint Health and Wellbeing Strategy
- An evidence-base of what works to deliver the best outcomes for local people
- A focus on early, creative preventive approaches, based in local communities.
- A shared understanding of risk
- A need for improved information, advice and signposting about services available to people, including services available from the voluntary and community sector
- National direction and national outcomes and frameworks for the NHS and social care.

2.3. The JCB will provide collective governance in relation to the commissioning of health and social care for adults in Wiltshire and to be accountable to the Health and Wellbeing Board for the delivery of joint commissioning arrangements.

2.4. The JCB will oversee the management of existing joint investments and initiatives

2.5. The JCB will oversee a targeted programme of activities that exploits opportunities where greater coordination, alignment and/or integration of resources can lead to improved outcomes and efficiency. This could include the recommendation for pooled funds.

2.6. The JCB will ensure that joint commissioning plans are effective and are monitored against the agreed performance measures for each service

2.7. The JCB will make recommendations to the Wiltshire Council Cabinet and CCG Governing Body on priorities for service redesign, investment and disinvestment – this will include agreeing changes to premises, support services, and facilities management.

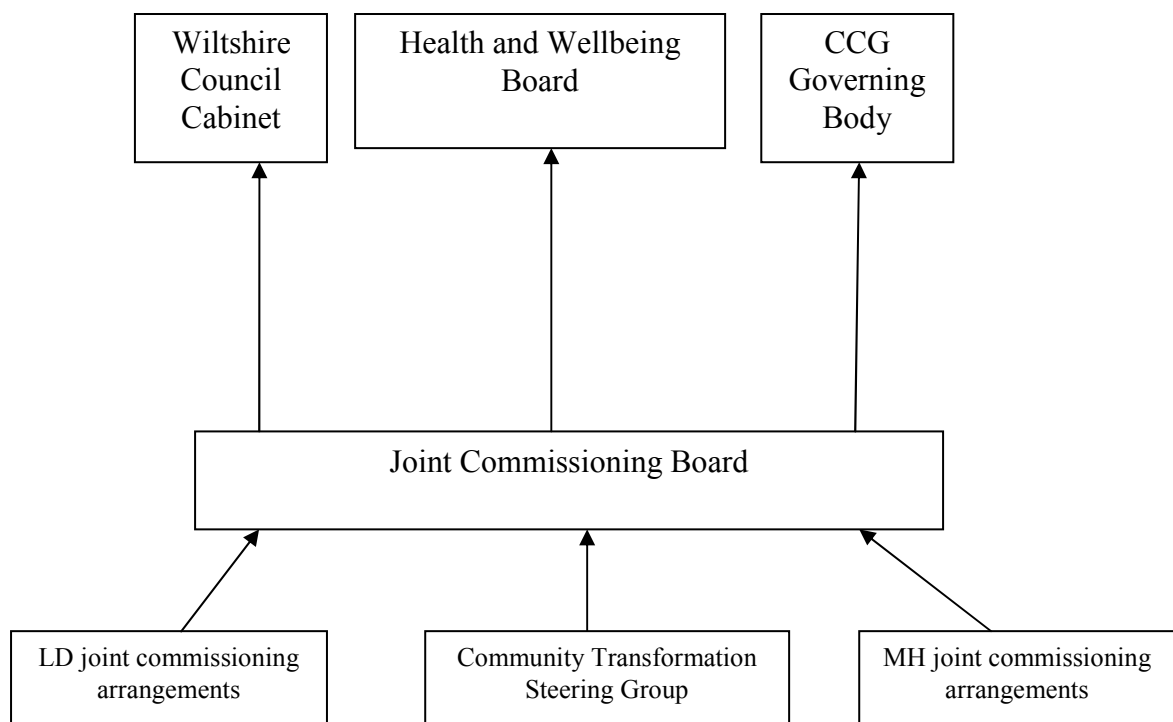
2.8. The JCB will review risks raised by constituent organisations to the delivery of the agreed Health and Wellbeing Strategy and other significant service issues

3. Structure and reporting

3.1 In Year 1 the JCB will work within the schemes of delegation and the accountability arrangements of the Council and the CCG. Decisions of the JCB will need to be ratified by the Wiltshire Council Cabinet and the CCG Governing Body. Individual members will be responsible for reporting progress through their organisations' appropriate internal governance arrangements.

3.3. The JCB will report on progress (as a minimum) twice each year to the Health and Wellbeing Board

3.3 Executive groups will sit beneath the JCB and run the day to day business of each of 3 priority areas for joint commissioning: learning disabilities; mental health; community transformation programme. The diagram below sets out reporting arrangements



3.4 Frequency of meetings

The JCB will meet 6 times per year. Meetings will be held in private and take place in alternate months to the HWB meetings. Meetings will be on Tuesdays or Thursdays.

3.5 JCB Membership

Membership from CCG

- Accountable Officer - Deborah Fielding
- Chief Finance Officer - Simon Truelove
- Director of Quality and Patient Safety – Jacqui Chidgey-Clark
- Director of Planning, Performance and Corporate Services – David Noyes
- Group Director WWYKD – Mike Relph
- Group Director Sarum – Mark Harris
- Group Director NEW – Ted Wilson
- GP – to be advised

Membership from Wiltshire Council

- Corporate Director – Maggie Rae
- Service Director Strategy & Commissioning – James Cawley
- Head of Finance – Janet Ditte
- Head of Commissioning, Older People – Nicola Gregson
- Head of Commissioning, Specialist Services – George O'Neill
- Head of Performance, Health & Workforce – Sue Geary
- Head of New Housing – Janet O'Brien
- Head of Business Change – Iain Kirby
- Public Health Consultant – to be advised

Other attendees in an advisory/supporting role as required

3.6 Executive Group

A small executive group will be established, to meet informally every 2 months, in alternate months to JCB meetings. The executive group will determine the agenda for JCB meetings and maintain an overview of the joint work programme.

3.7 Year 1 Chair

The CCG Accountable Officer will chair the JCB in Year 1, with Wiltshire Council Corporate Director acting in the role of vice chair. The allocation of responsibilities for Year 1 reflects the fact that the Health and Wellbeing Board is chaired by the Council and the Vice Chair is a member of the CCG Governing Body.

3.8 Conflicts of interest

The Chair will ensure that conflicts of interest are formally disclosed and managed in adherence with the Nolan Principles for Standards in Public Life and in favour of the commissioning of high quality, safe and cost effective services

3.9 Year 1 Joint Commissioning Board Support

In the first year, the Board will be supported by officers from Wiltshire Council.

4. Year 1 Priorities

- Community Services Transformation – including the immediate priorities of improving patient flow through the system to relieve pressures on acute healthcare and reduce the number of long-term care placements.
- Community Mental Health and Dementia – review of options for joint commissioning and improved delivery
- Learning Disabilities – review of options for joint commissioning and improved delivery, including the delivery of a shared action plan resulting from Winterbourne View inquiries.

Wiltshire Children & Young People's Trust

*To improve outcomes for children & young people in Wiltshire
and to promote and support resilient individuals, families and communities.*



Wiltshire Children & Young People's Trust Arrangements

The revised Children's Trust governance arrangements will lead to more involvement of agencies working with children and young people and to a stronger focus on commissioning. This will be underpinned by the participation and involvement of children, young people, parents and carers.

