

Item No. 11.	Classification: Open	Date: 27 July 2020	Meeting Name: Health and Wellbeing Board
Report title:		Update on the review of the Health and Wellbeing Board	
Ward(s) or groups affected:		All	
From:		Jin Lim, Acting Director of Public Health	

RECOMMENDATIONS

1. To note the options for consideration emerging from the Health and Wellbeing Board review that commenced in February 2020 (Appendix 1). This review was paused in early March due to the pandemic.
2. To request that partners consider these options alongside the Health and Wellbeing Board's additional oversight function for pandemic outbreak prevention and control.
3. That a final review report be brought back for agreement to the Health and Wellbeing Board in September setting out the refreshed Terms of Reference and relationship to Partnership Southwark and the Southwark Borough Based Board.

BACKGROUND INFORMATION

4. Health and wellbeing boards were established under the Health and Social Care Act 2012 where key leaders from the local health and care system could work together to improve the health and wellbeing of their local population. They have a statutory duty, with clinical commissioning groups (CCGs) and local partners, to produce the joint strategic needs assessments for the local population¹ (including the pharmaceutical needs assessment) and the joint health and wellbeing strategy.
5. The Health and Wellbeing Board began the review to refresh its Terms of Reference in February 2020 in light of the recent changes to the health and care system, namely the establishment of the SE London CCG and the Integrated Care System (ICS) and the emerging Borough Based Board (CCG) and Partnership Southwark.
6. A multiagency stakeholder workshop was held in February 2020 to re-visit the statutory requirements and guidance relating to the establishment of health and wellbeing boards² alongside the more recent requirements to establish

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https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/277012/Statutory-Guidance-on-Joint-Strategic-Needs-Assessments-and-Joint-Health-and-Wellbeing-Strategies-March-20131.pdf

2

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/144020/General-health-and-wellbeing-board-duties-and-powers.pdf

integrated care systems (ICS)³. In an integrated care system, NHS organisations, in partnership with local councils and others, take collective responsibility for managing resources, delivering NHS standards, and improving the health of the population they serve. There were also follow up discussions with individual partners. Although the review was paused in early March due to Covid 19 pandemic priorities, a number of emerging options have been identified for consideration. The options are set out in Appendix 1.

KEY ISSUES FOR CONSIDERATION

7. The options for consideration are set out in Appendix 1. It should be noted that the options are mutually exclusive and that it may be possible to combine options in particular for options 3 and 4.
8. Further stakeholder discussions will take place on the 4 options over August and a paper with recommendations will be brought back to the Health and Wellbeing Board in September.

Community impact statement

9. The review and proposed options all seek to improve the health and wellbeing of the population.

Legal implications

10. There are no immediate legal implications arising from this paper, although there may be implications depending on which option is adopted in the future.

Resource implications

11. There are no immediate resource implications.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
Southwark's Constitution – who takes decisions	Constitution	Tim Murtagh Tim.Murtagh@southwark.gov.uk

APPENDICES

No.	Title
Appendix 1	Health and Wellbeing Board review – draft options
Appendix 2	Health and Wellbeing Board Terms of Reference (March 2016)

³ <https://www.england.nhs.uk/integratedcare/integrated-care-systems/>

AUDIT TRAIL

Lead Officer	Jin Lim, Acting Director of Public Health
Report Author	Jin Lim, Acting Director of Public Health
Version	Final
Dated	19 July 2020

	Options	Strengths	Weaknesses
[1]	<p><u>No change</u></p> <ul style="list-style-type: none"> ▪ Continue with current Health and Wellbeing Board arrangements as-is. ▪ Develop Partnership Southwark and the Borough Based Board in parallel and separately 	<ul style="list-style-type: none"> ▪ Maintains current well developed HWBB arrangements 	<ul style="list-style-type: none"> ▪ Does not take account of the synergies in scope and the overlap in membership ▪ Potential duplication in agenda
[2]	<p><u>Extend role of Health and Wellbeing Board</u></p> <ul style="list-style-type: none"> ▪ Co-opt additional members to Health and Wellbeing Board and extend its function and scope to cover the role of Partnership Southwark 	<ul style="list-style-type: none"> ▪ Maintains current well developed HWBB arrangements ▪ Keeps it simple ▪ Takes advantage of synergies in membership and representation 	<ul style="list-style-type: none"> ▪ Extends size of agenda and remit and scope for Board. ▪ Practicalities of increased and broader membership of HWBB, agenda management due to board scope & lengthy meetings ▪ Additional pressures arising from pandemic oversight ▪ Out of step with other boroughs and SEL / national approaches

<p>[3]</p>	<p><u>Create integration board as sub board of Health and Wellbeing Board</u></p> <ul style="list-style-type: none"> ▪ Create Partnership Southwark as a sub group of the Health and Wellbeing Board with separate chairing and augmented representation 	<ul style="list-style-type: none"> ▪ Maintains strong linkage to HWBB and its role ▪ Maintains an overall accountability to HWBB ▪ Ensures a level of separation and enables broader system ownership ▪ More manageable agenda ▪ Takes advantage of synergies in membership and representation 	<ul style="list-style-type: none"> ▪ Requires further clarification of governance and decision making and committee administration
<p>[4]</p>	<p><u>Develop the Health and Wellbeing Board as the public and community engagement board to inform and shape integration</u></p> <ul style="list-style-type: none"> ▪ The Health and Wellbeing Board continues to fulfil its statutory scope and leads on public and stakeholder engagement which will then shape the direction for Partnership Southwark. ▪ Establish Partnership Southwark as the partnership board for commissioning and systems integration. 	<ul style="list-style-type: none"> ▪ Maintains strong linkage to HWBB and its role ▪ Maintains an overall accountability to HWBB ▪ Ensures a level of separation and enables broader system ownership ▪ More manageable agenda ▪ Takes advantage of synergies in membership and representation ▪ Fits well with the engagement and oversight function for pandemic control and prevention 	<ul style="list-style-type: none"> ▪ Requires further clarification of governance and decision making and committee administration ▪ Requires further scoping of public engagement function and identification of resourcing

** Informed by February 2020 workshop and draft notes.

APPENDIX 2

Health and Wellbeing Board Terms of Reference

PART 3L: HEALTH AND WELLBEING BOARD

ROLE AND FUNCTIONS

1. The Health and Social Care Act 2012 requires the local authority to establish and participate in the health and wellbeing board. The board shall be established as a committee of the council (section 102 of the Local Government Act 1972, subject to regulations issued by government).
2. The Health and Social Care Act 2012 states that the health and wellbeing board will have various functions. These include those conferred on it directly, such as the duty to encourage integrated working and in particular encourage the use of National Health Service Act 2006 powers to pool health budgets. It also includes duties conferred jointly on the local authority and its partner clinical commissioning groups (CCGs) but which must be discharged by the board. These joint duties include the preparation and publication of joint strategic needs assessments (JSNAs) and joint health and wellbeing strategies (JHWSs).

MATTERS RESERVED FOR DECISION

3. To prepare and publish a JSNA and a JHWS to meet the needs identified in the JSNA in relation to the local authority's area.
4. To recommend the final version of the JHWS to be signed off by cabinet and the CCG governing body.
5. To involve third parties in preparation of the JSNA and JHWS including the Local Healthwatch and people living or working in the area, having regard to guidance from Secretary of State.
6. Together with each of its partner clinical commissioning groups, to have regard to the JSNA and JHWS in the exercise of any function.
7. When developing the JHWS, consider extent to which needs could be met more effectively by making arrangements under National Health Service Act 2006, to pool health budgets.
8. To appoint additional members as the board sees fit beyond the statutory membership. It is noted that the local authority may also appoint such additional members as it sees fit (in consultation with the board if an appointment is made after the establishment of the board). The board will determine if these members are voting or non-voting.
9. To establish any sub-committees or working parties including appointment of chair, terms of reference and membership. The board shall identify the resources to support the body and the time period for which the body is established.
10. To consider the working programme of the board including its aims and priorities and to keep these under review.

Membership

11. The health and wellbeing board includes the following voting members:

- Local authority councillors, who will be (or be nominated by) the leader of the council^{*}
 - The leader of the council^{*}
 - The cabinet member for health and adult social care^{*}
 - The cabinet member for children's services^{*}
- The chief executive of the council
- The strategic director of children's and adults' services^{*}
- The director of public health^{*}
- Three representatives from the clinical commissioning group^{*}
- A representative of Southwark HealthWatch^{*}
- A representative from King's Health Partners
- Southwark Borough Commander, Metropolitan Police Service
- The chief executive of Community Action Southwark.

^{*} - Denotes a statutory member of the board.

Notes

- a) At the current time none of the council's executive functions are delegated to the health and wellbeing board. Any decision for the board to exercise any local authority executive functions would be determined by the leader of the council, under the "strong leader" arrangements.
- b) The board will operate in accordance within the council's existing decision-making framework and normal council budget setting processes.