
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*
 - Cabinet Member for Public Health and Community Safety *
 - Deputy Leader and Cabinet Member for Children, Young People and Schools*
 - Cabinet Member for Social Support and Homelessness*
 - Opposition Spokesperson for Health (Southwark Councillor)*
- The chief executive of the council
- The strategic director of children's and adults' services*
- The director of public health*
- Two representatives from the clinical commissioning group*
- A representative of HealthWatch Southwark *
- A representative from King's Health Partners (King's College Hospital NHS Foundation Trust)
- The chief executive of Community Southwark.
- Executive Director, Southwark Law Centre (voluntary sector)
- South London and Maudsley (SLAM) NHS Foundation Trust representative
- Southwark Headteachers representative.

* = 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.
- c) Any proposed change to the membership will be put forward to the health and wellbeing board for agreement.