

PLACE BOARD / HEALTH & WELLBEING BOARD

DATE	21/11/2022
REPORT OF	DEREK WARD DIRECTOR OF PUBLIC HEALTH
SUBJECT	PROPOSED REVISIONS TO THE TERMS OF REFERENCE FOR THE HEALTH & WELLBEING BOARD
STATUS	OPEN

CONTRIBUTION TO OUR AIM

The new terms of reference will enable the Health and Wellbeing Board to provide strategic oversight of both stronger economy and stronger communities within a refreshed place partnership system.

EXECUTIVE SUMMARY

There are planned changes to the partnership arrangements at North East Lincolnshire level and this report outlines the proposed lead Strategic Board with the role being taken on by the by a new and reinvigorated Health and Wellbeing Board. This paper outlines why these changes are being suggested.

RECOMMENDATIONS

In accordance with The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, if the Council wishes to alter the voting rights and membership, the Board must first be consulted on any proposed amendments.

It is proposed that the revised terms of reference 2022-23 of the Health and Wellbeing Board be considered and approved. That is to be done by:

- Amending the membership of the Board:
 - to reflect the abolition of the North East Lincolnshire CCG
 - agree new members to sit on the Board
 - agree core members
 - agree associate members
- Amending the Terms of Reference to:
 - Reflect the new governance structures created by the Health and Care Act 2022
 - Ensure the Board is actively engaged with the new structures
 - Identify and agree Boards in North East Lincolnshire that should be reporting to the Health and Wellbeing Board.

REASONS FOR DECISION

The changes in the Terms of Reference will equip the North East Lincolnshire Health and Wellbeing Board to both maintain its statutory duties and strengthen its position and function in the overall governance system and ensure that it is fit for purpose within

the new health and care system. The change to the Health and Wellbeing Board is also the first step in amending place working across North East Lincolnshire, ensuring a better focus on agreed shared priorities locally and enabling a NEL position to be developed and lobbied for in regional and national partnerships / discussions.

1. BACKGROUND AND ISSUES

The Health and Social Care Act 2012 gives health and wellbeing boards specific functions. These are a statutory minimum and further functions can be given to the boards in line with local circumstances. The statutory functions are:

- To prepare Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs), which is a duty of local authorities and Integrated Care Board (ICB).
- 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.
- Any other functions that may be delegated by the council under section 196(2) of the Health and Social Care Act 2012. For example, this could include 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.

It is clear from the Health and Social Care Act 2012 that health and wellbeing boards are different to other section 102 committees, in particular in relation to the appointment of members. Specifically, the Act sets a core membership that health and wellbeing boards must include: ◦

- at least one councillor from the relevant council ◦
- the director of adult social services ◦
- the director of children's services ◦
- the director of public health ◦
- a representative of the local Healthwatch
- a representative of each relevant Integrated Care Board
- any other members considered appropriate by the council •

The national, regional, and local context the Board is operating within has undergone significant changes with the passing of the Health and Care Act 2022. The Act provides a new legislative framework to facilitate greater collaboration within the NHS and between the NHS, local government, and other partners, and to support the recovery from the pandemic.

Health and Wellbeing Boards will remain in place and will continue to have an important responsibility at a local/place-based level to bring local partners together, as well as developing the Joint Strategic Needs Assessment and a Joint Health and Wellbeing Strategy, which both Health and Wellbeing Boards and ICSs will have to have regard to.

The Health and Care Act 2022 establishes new NHS bodies known as Integrated Care Boards (ICBs) and requires the creation of (Integrated Care Partnerships (ICPs) in each local system area. This will empower local health and care leaders to join up planning and provision of services – both within the NHS and with local authorities – and help deliver more person-centred and preventative care.

The Health and Wellbeing Board will be the key partnership responsible for the Health and Wellbeing outcome theme. Considering the changing landscape of both the health and care system and the Place arrangements for North East Lincolnshire, including the development of the ICS there it is now an opportunity to review the function and membership of the Board, whilst also meeting the requirements of the Care Act.

The Place Board has been operating in North East Lincolnshire for five years. Two years ago it was decided that, given the fundamental role and purpose of the Health and Wellbeing Board, it should fulfil the Place Board role as well. This has caused some confusion. This direction makes sense but it is considered that, based on the learning over recent years, this needs more clarity. Accordingly and for the avoidance of doubt, this report proposes that the Health and Wellbeing Board (operating as the NEL Place Board) is the primary strategic partnership board across North East Lincolnshire, into which the following Boards shall account, report and refer, as necessary:

- Development and Growth Board
- Safer Communities Partnership
- Sustainable Communities Board
- Learning and Skills Board
- Joint Committee (Designate) (the proposed statutory joint committee between the Integrated Care Board and the Council, overseeing the local health and care system)
- Other Boards established or to be established which it is agreed are important to health and wellbeing in North East Lincolnshire. This currently includes the Northern Lincolnshire Health Protection Board and the Northern Lincolnshire Combatting Drugs Partnership.

The wider determinants of health have been dealt with by the other boards in the past and still will in terms of delivery but in the new arrangement strategic direction

and leadership will now come through the Health and Wellbeing Board having that oversight of the wider determinants of health.

Sharing information has been useful during the pandemic but our partnerships now need to be more focussed on delivering improved outcomes for our community. The proposed 'reset' of the Health and Wellbeing Board is the first step in re-invigorating our partnerships and in re-emphasising a strategic leadership role (via the Health and Wellbeing Board) and a delivery leadership role (through the 4 thematic boards and the Joint Committee (Designate)).

2. RISKS AND OPPORTUNITIES

There is the opportunity through having a reinvigorated approach to partnership working at a Place level of recognising that the wider determinants that have traditionally been managed by other Boards, do have a significant impact on the everyday lives of the community of North East Lincolnshire. This approach could provide a more direct link into the community and could get more people involved in partnership working, whether that be at strategic, operational or neighbourhood level.

There is also an opportunity to get partnerships working the way that we have wanted them to for a number of years. Moving away from information sharing and discussions to shared decision making and ensuring appropriate actions taken by partner organisations.

There is a risk of disengaging in any partnership working. Some partners who are not sitting members of the Board may feel excluded from the partnership working at North East Lincolnshire level and this risk needs to be effectively managed. This should be about sitting members of the Board not representing necessarily just their organisation but representing a wider network that includes a whole host of different organisations, and that the community can in some way or shape influence the strategic thinking of all partners at North East Lincolnshire level.

This risk is mitigated by having people at the table who are seen to be place focussed, but this also risks them being seen as the 'usual suspects'. Getting things done with and for the community will result in this risk being minimised but does require time and effort to ensure that some organisations are not left behind and feel excluded from the partnership system.

3. OTHER OPTIONS CONSIDERED

The proposed approach is the preferred option based on the experience of partnership working in North East Lincolnshire over the last 5 to 10 years and as a result no other options have been considered at this time.

4. REPUTATION AND COMMUNICATIONS CONSIDERATIONS

There are potential positive/negative implications for the Council resulting from this decision.

Some organisations may feel excluded from the new partnership arrangements, and this might damage the reputation of the Council and partners.

The reputation of North East Lincolnshire could be enhanced in the way that it operates as a Place through the new arrangements by having a reinvigorated, renewed approach partnership working and through this approach have a clarified focus on the priorities and the issues that matter most to the people of North East Lincolnshire over the next three to five years.

The communications teams of all partner organisations need to be involved in sharing key messages across to the communities of North East Lincolnshire to ensure that everyone is aware of the focus of the Health and Wellbeing Board and what it is working on and the impact it is having. Challenge to the way the partnership works should be welcomed and a simple approach to community feedback / questions / concerns needs to be developed and added as a regular item at the Board meetings.

5. FINANCIAL CONSIDERATIONS

This proposal will contribute to improved value for money and more efficient use of scarce resources if all organisations are supported to focus on the delivery of fewer shared / agreed outcomes.

There have been discussions over several years via the LSP / Place Board / Health and Wellbeing Board around the total public sector budget that is available to all the partners that are involved and how the total budget can be pooled or aligned more effectively to deliver improved outcomes for the community of North East Lincolnshire. This has proved difficult to achieve.

By operating differently now, the above can be revisited and actions taken to minimise duplication of funding and to invest those public resources more effectively and efficiently into projects, programs and activities that do make a real difference to the lives of the people of North East Lincolnshire.

6. CHILDREN AND YOUNG PEOPLE IMPLICATIONS

The Health and Wellbeing Board will provide strategic oversight of the emerging Children's arrangements. It will also ensure full partnership commitment to the recommendations and changes outlined within the recent Ofsted improvement plan.

7. CLIMATE CHANGE AND ENVIRONMENTAL IMPLICATIONS

The Health and Wellbeing Board will provide strategic leadership to the Sustainable Communities Board which focuses on environmental and climate issues. The Board will be aware of the strategic priorities and progress and will receive regular monitoring through their Board for regular updates.

8. FINANCIAL IMPLICATIONS

There are no direct financial implications although the recommendations are designed to help drive improved economy, efficiency and effectiveness of decision making.

9. LEGAL IMPLICATIONS

The legal implications arising are largely addressed in the content of the above report. The composition and functions of the Health and Wellbeing Board are set out in statute and officers should ensure that any amendments to the terms of reference etc are consistent with and comply with such expectations.

Clearly open and transparent governance arrangements contribute directly to the achievement of the Council's strategic aims

10. HUMAN RESOURCES IMPLICATIONS

There are no direct HR implications within this report.

11. WARD IMPLICATIONS

Affects all wards in North East Lincolnshire

12. BACKGROUND PAPERS

Place Partnership Board Agendas over the last two years (<https://democracy.nelincs.gov.uk/meetings/category/place-board-health-and-well-being-board/>)

North East Lincolnshire Outcomes Framework (<https://www.nelincs.gov.uk/your-council/council-plan-vision-and-aims/>)

13. CONTACT OFFICER(S)

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North East Lincolnshire Health & Well Being Board

Revised Terms of Reference

1. Purpose

This document sets out the agreed principles and way of working for the North East Lincolnshire Health and Wellbeing Board.

It reflects the strong and effective partnership working across the health and care system and a commitment to the joint endeavour to deliver better health outcomes to the people of North East Lincolnshire.

2. Aims of the Board

The Health and Wellbeing Board is a statutory Committee of the Council and also a critical part of the governance structures for health and wellbeing in North East Lincolnshire.

It is the main strategic partnership for North East Lincolnshire (acting as the de facto 'Place Board') that brings together the NHS, the Council, and partners to:

- set the strategic direction for improving the health and wellbeing of the people who live, work and study in North East Lincolnshire
- reduce health inequalities, and
- promote and enable inclusive integrated service approaches to challenges and opportunities to improve local people's health and wellbeing.

The **aim** of the NEL H&WB Board is to cover the whole breadth of issues in NEL – that is, the H&WB Board would capture and be made aware of all the wider determinants of health discussions ongoing/taking place on other NEL Boards.

Evidence shows that it is the wider conditions of people's lives – their homes, financial resources, opportunities for education and employment, access to public services and the environments in which they live – that have the greatest impact on health and wellbeing.

3. Functions and Responsibilities of the Board

3.1 To deliver the functions of a Health and Wellbeing Board as set out in Section 195 and 196 of the Health and Social Care Act 2012.

- To encourage persons who arrange for the provision of any health and social care services in the area to work in an integrated manner.

- To provide advice, assistance, or other support, as it thinks appropriate, for the purpose of encouraging joint commissioning.
 - To prepare and publish a Joint Strategic Needs Assessment (JSNA) on the local population to inform local planning, commissioning and delivery of services.
 - To prepare and publish a Joint Health and Wellbeing Strategy (JHWS).
- 3.2 To produce the Pharmaceutical Needs Assessment (PNA) in accordance with the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (SI 2013/349) and liaising with NHS England and Improvement (NHSEI) to ensure recommendations or gaps in services are addressed.
- 3.3 To fulfil its role under section 14Z54 of the National Health Service Act 2006 and in particular to:
- give its opinion to the Integrated Care Board (ICB) on whether the draft ICB 5-year plan (or any draft revision to the plan) takes proper account of the local joint health and wellbeing strategy under section 14Z54(5)(a); and
 - determine whether to give that opinion to NHS England under section 14Z54(5)(b).
- 3.4 To determine whether to give to NHS England its opinion on whether the published ICB 5-year plan takes proper account of the local joint health and wellbeing strategy under section 14Z55 of the National Health Service Act 2006.
- 3.5 To fulfil its role as consultee in respect of the ICB's annual review of the steps that the ICB has taken to implement the joint local health and wellbeing strategy under section in accordance with section 14Z58 of the National Health Service Act 2006.
- 3.6 To respond to consultation by NHS England on any steps that the ICB has taken to implement any joint local health and wellbeing strategy as part of NHS England's annual performance assessment of the ICB under section 14Z59 of the National Health Service Act 2006.

4. Membership

Specifically, the Health and Care Act 2012 set a core membership that H&WB Boards must include: °

- at least one councillor from the relevant council ◦
- the director of adult social care services ◦
- the director of children's services ◦
- the director of public health ◦
- a representative of the local Healthwatch
- a representative of each relevant ICB
- any other members considered appropriate by the council •

In NEL, representatives from some of the other Boards in NEL shall be sitting members of the HW&B Board.

Boards with no sitting members on the HW&B Board shall be allowed to send representatives to the H&WB Board by invitation **only** when there is a paper on the wider determinants of health to be taken to the H&WB Board for information or discussion as the decision on these will rest elsewhere in the system.

In accordance with the statutory guidance, the **proposed membership** of the Board is therefore as follows:

Core Members

- Portfolio holder for Health Wellbeing & Adult Social Care
- Leader of the Council
- Portfolio holder for Children & Young People
- Portfolio holder for Children and Education
- Chief Executive of NELC
- Director of Public Health
- Director of Children's Services
- Director of Adult Social Care Services
- Place Director of NEL (NHS Humber and North Yorkshire ICB)
- Clinical Accountable Officer (NHS Humber and North Yorkshire ICB (Place-Based))
- Chief Executive, Northern Lincolnshire and Goole NHS Foundation Trust
- Health Watch (for H&WB)
- Chief Constable or representative
- Chief Fire Officer or representative
- Education (headteacher and FE reps)

- Chair of Development and Growth Board
- Representatives from the Voluntary and Community Sector (one of whom should sit on the Safer Communities Partnership Board)
-

Associate Members

- Community Pharmacy
- Humberside Police & Crime Commissioner
- Housing Providers
- Social Care Providers (
- Local Business (chair of D and G)
- Local Enterprise Partnership (LEPs)
- Sustainable Community Board rep

5. Chair and Vice Chair

The Chair and Vice Chair shall be elected by the Board at each Annual General Meeting (AGM.)

The Vice Chair shall be from a partner organisation other than the Council.

6. Voting Rights

When voting takes place Associate members do not get a vote.

Only core members of the Board are entitled to vote and decisions will be taken by majority vote.

The Chair has the casting vote.

In accordance with The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, if the Council's wishes to alter the voting rights and membership the Board must first be consulted on any proposed amendments.

7. Substitute Members

Board members shall send a substitute member to represent them should they be unable to attend and if appropriate cast their vote.

8. Quorum

The quorum for the Board will be attendance by one third of the membership.

This third shall include:

- Either the Chair or the Vice Chair
- A North East Lincolnshire Council Councillor
- An NHS Humber and North Yorkshire ICB representative

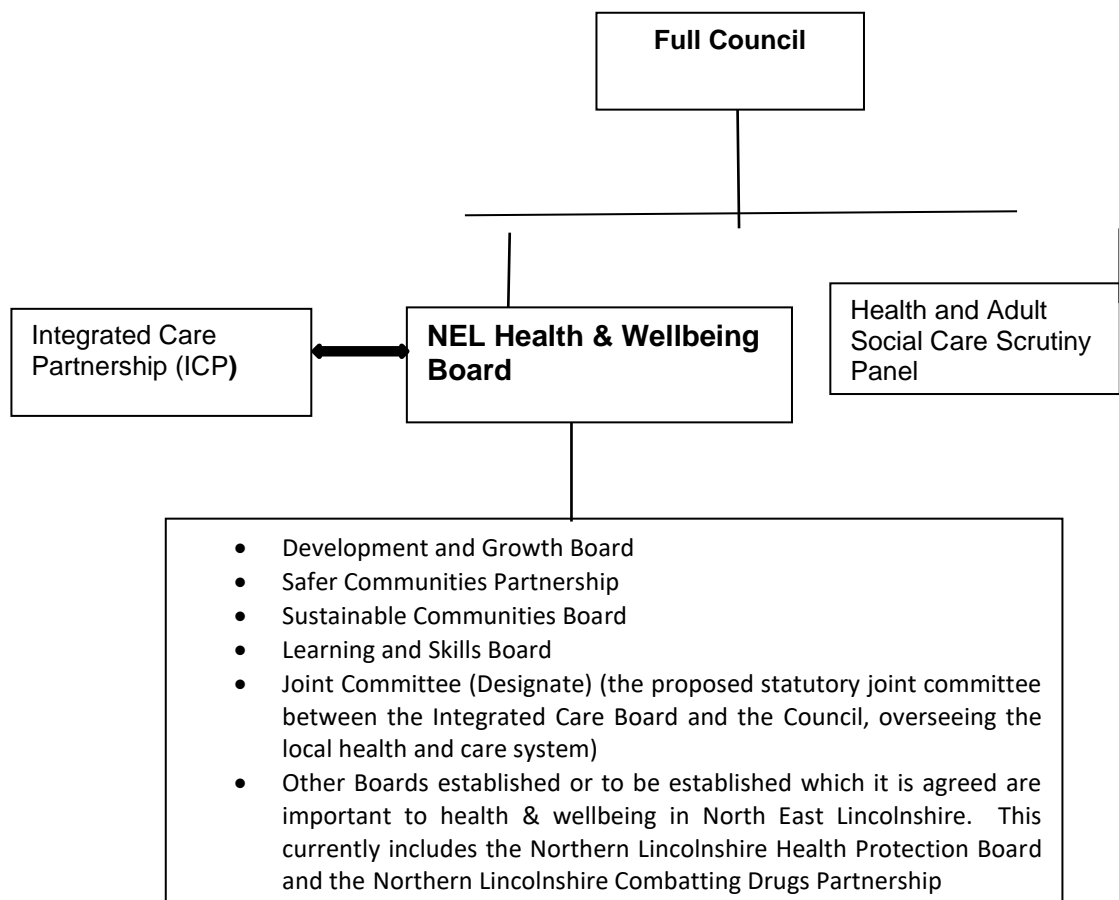
9. Frequency and Administration of the Board

The Board will meet on a quarterly basis and additional meetings of the Board may be arranged with the agreement of the Chair and Vice Chair.

10. Accountability and Reporting

The H&WB Board is accountable to Full Council and to *NHSEI via the Regional Team as required.*

Governance Structure



11. Conflict of Interest/Vested Interest

The Board may potentially consist of officers who are potentially conflicted or have a vested interest on the “client and potential contractor” side. It is the responsibility of officers, who are potentially conflicted, or have a vested interest, to declare this.

Any other identification of potential conflict or vested interest will be referred for legal advice, as required.

The issue of vested and/or conflicts of interests will be kept under review and will be revised, as appropriate.

12. Conduct of Members at Meetings

Ethical standards are expected to be upheld in public life and the seven principles of public life (The Nolan Principles) apply to all holders of public office and those who deliver public offices.

When at Board meetings or when representing the H&WB Board, in whatever capacity, a member must uphold the seven Nolan Principles of Public Life:

- Selflessness
- Integrity
- Objectivity
- Accountability
- Openness
- Honesty
- Leadership

13. Minutes

Democratic Services shall minute the meetings and produce and circulate an action log as part of the agenda to all core members.

14. Officer and Administrative Support

Appropriate officer and administrative support to be provided by North East Lincolnshire Council.

15. Review

The Terms of Reference will be reviewed annually, and any amendment shall only be included by a majority vote.

16. Communications

- The Board will need to ensure that key messages are captured from across the Partnership system and circulated accordingly.
- Key messages will need to be shared across the communities of North East Lincolnshire to ensure that everyone is aware of the focus of the H&WB Board.
- To ensure that the above happens, the H&WB Board will agree a communications plan and will agree key messages to be shared at each Board meeting.

Signature:

Signature:

Chair
NELC Health & Wellbeing Board

Vice Chair
NELC Health & Wellbeing Board

Date:

Date: