

**Decision Maker:** COUNCIL

**Date:** 27 February 2013

**Decision Type:** Non-Urgent Non-Executive Non-Key

**Title:** HEALTH AND WELLBEING BOARD –  
INTERIM ARRANGEMENTS

**Contact Officer:** Graham Walton, Democratic Services Manager  
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**Chief Officer:** Mark Bowen, Director of Resources

**Ward:** N/A

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1. Reason for report

- 1.1 The Health and Social Care Act 2012 introduced a requirement for local authorities to establish Health and Wellbeing Boards with effect from 1<sup>st</sup> April 2013. In Bromley, the Executive established terms of reference for a Shadow Health and Wellbeing Board in advance of the legislation in February 2010, and it has met every two months since then. Regulations to give detailed effect to the provisions in the Act have only just been published (on 8<sup>th</sup> February 2013) and this report enables the Council to put in place the formal structures required from 1<sup>st</sup> April on a temporary basis, pending further consideration of the overall governance arrangements and the exact composition of the Board which can then be appointed at the start of the 2013/14 Council year in May.
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2. **RECOMMENDATION(S)**

**(1) Pending further consideration for the 2013/14 Council year, the Health and Wellbeing Board be established from 1<sup>st</sup> April 2013 with the existing membership as set out in appendix 1 but with the Leader of the Council able to appoint up to nine members of the Council as necessary.**

**(2) The requirements of political balance are not applied to the membership of the Board.**

### Corporate Policy

1. Policy Status: New Policy:
  2. BBB Priority: Supporting Independence Children and Young People
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### Financial

1. Cost of proposal: No Cost:
  2. Ongoing costs: Not Applicable:
  3. Budget head/performance centre: Democratic Services
  4. Total current budget for this head: £320,320
  5. Source of funding: 2012/13 Revenue Budget
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### Staff

1. Number of staff (current and additional): There are 8 staff (7.22fte) in the Democratic Services Team
  2. If from existing staff resources, number of staff hours: N/A
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### Legal

1. Legal Requirement: The Health and Social Care Act 2012 and the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (SI 218 2013)
  2. Call-in: Not Applicable: This report does not involve an executive decision.
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### Customer Impact

1. Estimated number of users/beneficiaries (current and projected): N/A
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### Ward Councillor Views

1. Have Ward Councillors been asked for comments? No
2. Summary of Ward Councillors comments: N/A

### **3. COMMENTARY**

- 3.1 Section 194 of the Health and Social Care Act 2012 makes it a mandatory requirement for Bromley to set up a Health and Wellbeing Board for our area from 1 April next year with a minimum membership comprising:-
- (a) at least one Councillor;
  - (b) the Director of Adult Social Services;
  - (c) the Director of Children's Service;
  - (d) the Director of Public Health;
  - (e) a representative of the Local Healthwatch organisation;
  - (f) a representative of each relevant clinical commissioning group; and
  - (g) such other persons, or representatives of such other persons, as the Local Authority thinks appropriate.
- 3.2 Subject to these minimum requirements, the Council has some flexibility in establishing the initial membership of the Board, and could in theory appoint all 60 members of the Council. However some caution needs to be expressed as in other joint arrangements local authorities are either encouraged or prevented from dominating membership. It is therefore suggested that allowing a membership of up to nine Council Members will allow a suitable balance to be maintained. Following establishment of the Board, the Council is required to consult with it before appointing other Councillors or officers to take part. As Bromley operates Executive arrangements nominations to the Board will be made by the Leader of the Council.
- 3.3 Section 194(11) of the Act provides the Board is to be treated as a Committee appointed by the Council under Section 102 of the Local Government Act 1972, but with the powers of appointment to the Board held by the Leader of the Council. This is quite unusual, given the split of Executive/non-Executive functions introduced in the Local Government Act 2000. As a consequence of this the Board doesn't fit in neatly with established Council structures. It is also an interesting departure from normal local Government practice for Section 102 Committees to include officers and several other non-Councillors with voting rights. The Regulations make changes to Section 13 of the Local Government and Housing Act 1989 to allow voting by non-Councillors and also provide that political balance does not have to be applied.
- 3.4 Further consideration is needed on the precise governance arrangements for the Health and Wellbeing Board, but it is recommended that, as a temporary measure until the implications of the new regulations can be fully considered, the current arrangements for the Board should continue, with the proviso that the Leader may appoint up to nine Members of the Council in total. The terms of reference previously agreed by the Executive on 2<sup>nd</sup> February 2011 are set out in Appendix 1, with minor changes as necessary to bring them up to date.

### **4. POLICY IMPLICATIONS**

- 4.1 The proposals in this report build on the Council's existing priorities for working closely with health services and developing partnerships to contribute to a number of Building a Better Bromley priorities including Supporting Independence and Children and Young People.

### **5. FINANCIAL IMPLICATIONS**

- 5.1 There are no immediate financial implications.

## 6. LEGAL IMPLICATIONS

6.1 The Health and Social Care Act 2012 sets the framework for Health and Wellbeing Boards. The final provisions have recently been published in the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (SI 218 2013).

## 7. PERSONNEL IMPLICATIONS

7.1 There are no personnel implications.

<b>Non-Applicable Sections:</b>	
Background Documents: (Access via Contact Officer)	Report to the Executive (2 <sup>nd</sup> February 2011) – Public Health in Bromley – Section 75 Arrangements & Shadow Health and Wellbeing Board

**Bromley Health and Wellbeing Board**

**Terms of Reference (from 1/4/2013)**

**Background and context:**

The Bromley Health & Wellbeing Board has been established to further the objective of achieving a sustainable high quality health and social care system for the residents of the Borough and to ensure the maximum benefits are delivered arising out of the Government's "Equity & Excellence - Liberating the NHS" White Paper.

The overall remit for the Board will be consistent with those set out in the Health White Paper "Equity and Excellence – Liberating the NHS":

*To make recommendations to the Council's Executive and the CCG on the management and governance arrangements necessary to enable achievement of the following strategic objectives -*

*i) to assess the needs of the local population and lead the statutory joint strategic needs assessment*

*ii) to promote integration and partnership across the Borough, including joined up commissioning plans across the NHS, social care and public health*

*iii) to support joint commissioning and pooled budget arrangements, where all parties agree this makes sense*

*iv) to undertake a scrutiny role in relation to major service redesign*

*In relation to point iv) this shall not impact on the statutory role of the Council Policy Development & Scrutiny Committee for scrutiny of proposals for changes to NHS services nor of holding local NHS organisations to account.*

**Membership:**

The membership of the Shadow Board shall be composed of the following:

**LBB:**

Cllr Graham Arthur, Portfolio Holder for Resources (Chairman)

Cllr Robert Evans, Portfolio Holder for Care Services

Cllr Stephen Wells, Portfolio Holder for Education

Cllr Diane Smith, Executive Assistant for Care Services

Cllr Charles Rideout, Care Services PDS Scrutiny Committee member

...and any other Councillors appointed by the leader of the Council, up to a total of nine.

Terry Parkin, Director of Education and Care Services

Nada Lemic, Director of Public Health

**Clinical Commissioning Group:**

Jim Gunner, Chairman

Dr Angela Bhan, Managing Director, BSU

Harvey Guntrip, Non-executive Director

Dr Ruchira Paranjape, Bromley GP Consortia  
Dr Andrew Parson, Bromley GP Consortia  
Dr Mandy Selby, Bromley GP Consortia

**Bromley Voluntary Sector:**

Sue Southon, Chair, Community Links Bromley  
Representative from Bromley Healthwatch

The Board will be supported by officers of the Council and CCG as appropriate.

**Chairman:**

The Chairman of the Health and Well-Being Board shall be appointed by the Council from amongst the elected members represented on the Board.

**Quorum:**

A quorum shall consist of at least one third of the membership including at least one councillor, one LA chief officer and one GP representative.

**Frequency of Meetings:**

The Board shall meet at least quarterly and shall review its Terms of Reference in the light of any emerging guidance from Government or Department of Health.

**Reporting:**

The Board will report to the Council and to the CCG through sending minutes of its meetings to the CCG Board and the Council Executive.

## **Workplan for the Board:**

### **A. Future organisational plans:**

- i) To keep under review the ToR and workings of the Board and make any recommendations on future changes or modifications to enable the Board to function effectively.
- ii) To consider arrangements for Public Health and Health Improvement Functions as transferred to the Local Authority.
- iii) To consider options for the future of health and social care commissioning and the opportunities for joint commissioning across health and social care.
- iv) To propose organisational and governance arrangements to support the above.
- v) To consider the budgetary and financial implications of each of the above.

### **B. Current Commissioning:**

- i) To consider options for integration initiatives, efficiencies and service improvements through joint working and or joint commissioning/procurement activity.
- ii) To consider specific commissioning plans, strategies and proposals which have a health and social care component and to recommend their acceptance to the Council's Executive and/or the Executive Board of the GP Consortium.
- iii) To consider proposals for the best use of new funds for investment in reablement and social care services and to recommend such plans as required.

### **C. Service Delivery and Strategic Performance Management:**

- i) To keep under review the delivery of local health and social care services against standards and key performance indicators.
- ii) To consider options for further integration of service delivery across health and social care services within both adult and children arenas.
- iii) To keep under review the financial implications arising from the above to secure service and cost benefits delivered through closer integration and joint working.

### **D. Engagement:**

- i) To provide regular information to the Social Care Health and Housing Partnership Board and the Children's Trust Board to ensure that the broader stakeholder community is informed and can contribute to the work of the Board.
- ii) To consider options for the engagement of wider stakeholders in future Governance, planning and scrutiny arrangements for Health & Well-being in Bromley.
- iii) To consider options for the development of local Health Watch.