

TEES VALLEY HEALTH SCRUTINY JOINT COMMITTEE

26 March 2012



Report of: Louise Wallace, Assistant Director of Health Improvement

Subject: PROGRESS TO DATE IN THE ESTABLISHMENT AND OPERATION OF HARTLEPOOL'S SHADOW HEALTH AND WELLBEING BOARD

1. PURPOSE OF THE REPORT

1.1 To provide an update in relation to the establishment and operation of Hartlepool's Shadow Health and Wellbeing Board.

2. THE ESTABLISHMENT OF HARTLEPOOL'S SHADOW HEALTH AND WELLBEING BOARD

2.1 Cabinet, at its meeting on the 15 August 2011, received a detailed report in relation to the establishment of Hartlepool's Shadow Health and Wellbeing Board. As part of this report Cabinet was asked to consider a number of key issues (as detailed in **Appendix A**), and concluded that:-

- i) In view of the Board's responsibility to discharge executive functions of the Local Authority, only Executive Members be appointed to the Board, with the Elected Mayor as Chair of the Board for the first year.
- ii) The development of the Shadow Health and Wellbeing Board in light of the review of the Local Strategic Partnership arrangements.
- iii) The terms of reference be noted (Agreed by the Shadow Health and Wellbeing Board at its meeting on the 10 October 2011. Copy attached at **Appendix B**).
- iv) The development of the Shadow Health and Wellbeing Board in light of the reviewed of the Local Strategic Partnership arrangements.
- v) The shadow Health and Wellbeing Board be established by the end of September 2011 and be supported by Democratic Services.

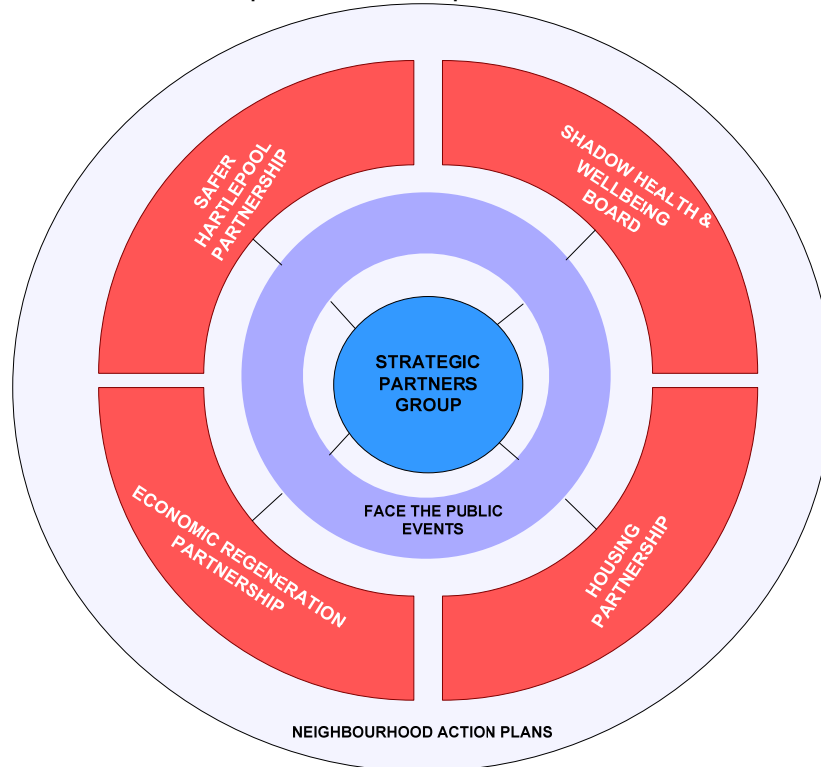
- vi) A further report be received in respect of the establishment of the formal Health and Wellbeing Board when the requirements had been fully established and full guidance was available.
- vii) The potential constitutional implications of establishing a Health and Wellbeing Board be referred to Constitution Committee as and when more guidance was made available.

2.2 The Shadow Health and Wellbeing Board went on to have its inaugural meeting on the 10 October 2011 and has met a further three time since then.

3. BUILDING KEY RELATIONSHIPS

3.1 The Shadow Health and Wellbeing Board at its meeting on the 10 October 2011 agreed its governance and reporting arrangements, summarised in the below table.

Hartlepool Partnership Structure 2011



3.2 The Shadow Health and Wellbeing Board, at its meeting on the 21 November 2011, also established its operating principles to support its effective establishment and functioning.

4. SETTING PRIORITIES

4.1 The Shadow Health and Wellbeing Board, at its meeting on the 10 October 2011, initiated discussion with the Local Authority, Clinical Commissioning

Group, Public Health, NHS Providers and Health Watch in terms of the identification of priorities. Consideration has also been given to the process for the completion of the Joint Strategic Needs Assessment, development of the Hartlepool Joint Health and Wellbeing Strategy and their importance in setting future priorities and the work programme for the shadow board.

5. ENSURING ACCESS TO APPROPRIATE EXPERTISE

- 5.1 At its meeting on 18 July 2011 Cabinet made a number of decisions that collectively set out the future approach of the Local Authority to community and stakeholder involvement and engagement and the Local Strategic Partnership, including theme partnerships. Two decisions taken were made 'in principle' as they may need to be revised following publication of the statutory guidance on Health and Wellbeing Boards. Those decisions were the proposed structure for community and stakeholder involvement and engagement and the creation of a Strategic Partners Group which will include the Mayor, all Cabinet Members and Chief Executive and other partners from the proposed membership option 2. Once the statutory guidance has been received a further report will be taken to Cabinet which will either confirm that the decisions are unaffected and therefore can be implemented or if the decisions are affected, Cabinet will be asked to consider alternative proposals which reflect the new position.

6. RECOMMENDATION

- 6.1 That the report be noted.

Appendix A

- 2) Developing and agreeing terms of reference for the Hartlepool shadow Health and Wellbeing Board with the Local Authority Cabinet, Primary Care Trust Board and Clinical Commissioning Group.
- 3) Agreeing effective mechanisms for ensuring appropriate commissioner and provider engagement.
- 4) Agreeing how the shadow Health and Wellbeing Board should be established in the light of the Local Strategic Partnership Review.
- 5) Agreeing how the shadow Health and Wellbeing Board develops relationships with other partnerships such as the Safer Hartlepool Partnership, Safeguarding Board and Children's Partnership.
- 6) Ensuring the governance arrangements and any constitutional changes required for the Board will be sufficient for assuming committee status within the Council.
- 7) Agreeing decision making processes of the shadow Board e.g. voting and majority representation.
- 8) Agreeing performance management processes and how the shadow Board will be held to account to delivering on targets and outcomes.
- 9) Ensuring robust engagement of all stakeholders and how this will be sustained over time.
- 10) Ensuring a positive relationship with existing Health Overview and Scrutiny arrangements.
- 11) Ensuring shadow Board meetings are held in public and that the public are made aware of the activities of the Board.
- 12) Supporting the role of Health Watch and participation as full members of the shadow Board.
- 13) Ensuring the shadow Board members are provided with development opportunities to gain a greater understanding of each partner agencies agenda and issues.
- 14) Agreeing how each organisation commissioning cycles, plans and priorities are integrated into the work of the shadow Board.
- 15) Ensuring that the joint strategic needs assessment is an integral part of the process for setting joint commissioning priorities.
- 16) Create a robust, reciprocal relationship with the Clinical Commissioning Group (CCG) to ensure there are positive challenges of the CCG plans by the shadow

Health and Wellbeing Board; and in reverse the CCG constructively challenges the work of the shadow Health and Wellbeing Board.

- 17) Relationship between the shadow Health and Wellbeing Board and Local Safeguarding Board.

Shadow Health & Wellbeing Board Terms of Reference

*Version 1.0
October 2011*

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1.0 Purpose and functions of the Shadow Health & Wellbeing Board

The following objectives will form the basis of the annual work programme of the Shadow Board:-

- To ensure the development and use of comprehensive evidence based Joint Strategic Needs Assessment (JSNA) in informing commissioning priorities and investment in health, social care and well being services.
- To jointly plan, develop and implement a Health and Wellbeing Strategy that will deliver the vision of the Board, based on the JSNA and focused on the wider determinants of health and wellbeing.
- To ensure consistency between the Health and Wellbeing Strategy and the commissioning plans of the Clinical Commissioning Group.
- To promote and ensure integration and joint commissioning across health and social care particularly for those services being commissioned and provided to the most vulnerable people.
- Participate in the formal authorisation of the Clinical Commissioning Group.
- To actively maximise the opportunities and mechanisms for involving local people in the processes to develop the JSNA; Health and Wellbeing Strategy and subsequent service provision.
- To frequently monitor performance against the Health and Wellbeing Strategy with an agreed set of health outcome measures to maximise resources and secure new resources into the town such as through the proposed 'health premium'.

2.0 Roles & Responsibility of Board Members

The main role of all members of the Shadow Health & Wellbeing Board will be to take a Borough wide perspective and develop consensus in the best interests of the residents of Hartlepool. Members will bring their own perspectives and also represent their organisation, interest group or area. They will be recognised for their valuable contribution bringing ideas, knowledge and expertise to the process. Where practicable members should have the authority to take decisions and make commitments. Individual partners will remain responsible and accountable for decisions on their services and the use of their resources. The Board recognises that each partner has different mechanisms for their own decision making. In some cases decisions may be endorsed by the bodies or organisations from which the members are drawn.

2.1 Standards of behaviour

As a member of the Shadow Health & Wellbeing Board, whether in meetings or working on behalf of the Board, the following guidelines outline what is expected of members.

Accountability: to work openly and honestly and to report back their work on the Board to their organisation or sector.

Commitment: to attend shadow board meetings, participate in occasional task group meetings and one-off events. To be properly prepared for meetings by reading the paperwork beforehand. To be prepared to learn from others and from good practice elsewhere and to further develop the breadth of their knowledge of their sector's role within the borough.

High Quality Debate: to remain focussed and strategic and to contribute positively to discussions and work with other members to achieve consensus and take important decisions regarding the strategic development of the borough.

Honesty and Integrity: to act with honesty, objectivity and integrity in achieving consensus through debate. To respect the confidentiality of the information provided.

Objectivity: to consider what is in the best interests for the common good of Hartlepool and to weigh this along with the interests of their organisation, their sector and themselves when making decisions.

Representative: to effectively reflect the interests of their sector, to raise areas of concern and contribute their experience and expertise to discussions and decisions to achieve good workable solutions.

Respect for others: to respect and to take into account the views of other members regardless of their gender, race, age, ethnicity, disability, religion, sexual orientation or any other status.

3.0 Membership

There are two types of member on the Shadow Health and Wellbeing Board; a voting and a non voting member. Those members who are exclusively providers of services will be non-voting members due to the fact that there is the potential for conflict of interest or vested interest in commissioning decisions. Those organisations that are both commissioner and providers will be voting members on the Shadow Board with a commissioner perspective and not as a provider.

Voting Members (statutory members)

- Directly Elected Mayor
- Executive Members of the Local Authority
- Chief Executive of Local Authority
- Representative of Clinical Commissioning Group
- Chief Executive / Director of the PCT (transitional arrangement until 2013)
- Director of Public Health
- Director of Child and Adult Social Services
- HealthWatch Board Member
- Participation of the NHS commissioning Board
- Patient representative (s)

Non-voting Members (non-statutory members)

- Director of Regeneration and Neighbourhoods
- North Tees and Hartlepool NHS Foundation Trust
- Tees Esk and Wear Valley NHS Trust
- Voluntary Sector Representative (s)
- North East Ambulance NHS Trust

There is the potential for co-opting members onto the Shadow Board to undertake specific pieces of work or for specialist knowledge and skills as agreed by the majority of voting board members.

3.1 Chairing of the Shadow Health & Wellbeing Board

The Chair in the first instance will be the Directly Elected Mayor of the Local Authority and will hold office for one year. Should the position of chair fall vacant during the year the Vice Chair will assume the role of Chair for the remainder of the year, until the annual nomination and election of a new chair.

The Vice-Chair will also be elected at the first meeting of the Shadow Board by being proposed by another member and a simple majority vote of all voting members. The Vice-Chair will hold office for one year and will be a representative of a different organisation than the Chair.

4.0 Principles

All members of the Shadow Health & Wellbeing Board will strive to apply the following nine principles as established in the Community Strategy:

- Effective decision making and communication
- Effective partnership working
- Efficient partnership working
- Acting with integrity
- Ensure widest possible involvement and inclusion
- Demonstrating leadership and influence
- Effective performance management
- Developing skills and knowledge
- Contributing to sustainable development

5.0 Performance management

The Shadow Board is responsible for delivering the Health & Wellbeing theme of the Community Strategy of which the Partnership Plan is the action plan. The Board will receive regular updates on progress towards achieving targets. Where performance is not on track they will take action to address this.

The Shadow Board will also be responsible for monitoring the development and delivery of the Health and Wellbeing Strategy.

5.1 Information, advice and support

All information, advice and support will be fit for purpose and tailored to the functions of the Shadow Board. The Shadow Board will ensure that all information is directly relevant to the decisions being taken and is:

- relevant
- accurate
- timely
- objective
- clear and concise
- reliable

The Shadow Board will call on professional advice and support when deemed necessary, particularly when the outcome of decision has a significant legal or financial implication.

6.0 Developing capacity and capability

The Shadow Board is aware of the importance of ensuring members have the right skills, knowledge and experience to play an effective part in delivering the strategic aims of the Shadow Board. It aims to involve individuals who reflect the community they represent. It will balance the need for stability which comes from continuity of knowledge and relationships with the need for new ideas and new thinking.

Through a Shadow Board development process all members will be given the opportunity to further develop their skills and update their knowledge throughout their period of membership. This will aim to maximise the skills, capacity and resources of all members.

7.0 Engaging with stakeholders

The Shadow Board will take the lead in forming and maintaining relationships and representation with other partnerships and stakeholders on a local, regional and sub regional level which will directly effect and/or influence its success.

The Shadow Board will strive to meet the codes of practice and terms of engagement as set out in Hartlepool's COMPACT.

8.0 Operation of the Shadow Health & Wellbeing Board

8.1 Attendance at meetings

Members will endeavour to attend all meetings however if they are unable to attend any meeting then they should submit their apologies in advance of the meeting.

As flexibility and continuity is essential to partnership working, each Member may identify a named substitute who may attend on their behalf when necessary. Substitutes should be suitable senior representatives who are able to speak on behalf of their organisation.

8.2 Declaration of Interests

Each member of the Shadow Health and Wellbeing Board is required to declare any personal or pecuniary interest (direct or indirect) in any agenda items and shall take no part in the discussion or decision making about that item. All such declarations must be included in the minutes of the meeting.

8.3 Meeting Procedures

The Shadow Board will meet on a six weekly basis initially to establish work programme and ensure momentum until the board is formally in place by 2013.

There will be an annual review meeting to reflect on the performance of the Shadow Board and proactively plan for the forthcoming year.

8.4 Freedom of Information Act

The Freedom of Information Act gives everyone the right to access information that is held by public authorities. Hartlepool Borough Council has developed guidance to help staff comply with the act. The Shadow Health & Wellbeing Board will work within this policy when giving out information to partners and the public.

8.5 Public access to the Shadow Health & Wellbeing Board

Meetings of the Shadow Health & Wellbeing Board will be open to the public and press unless in exceptional circumstances they are excluded by a vote for reasons that shall be recorded. Specially designated seating will be provided for observers. Observers will not be allowed to comment or address the Shadow Board unless asked to do so by the Chair. They do not have the right to vote on any issue.

8.6 Secretarial Support arrangements

The Shadow Health and Well Being Board will receive secretarial support through the Local Authority Democratic Services Team. The Board will also be supported by a virtual multi-agency commissioning team.

8.7 Sub Groups

Occasionally a Sub Group of the Shadow Health & Wellbeing Board may need to be established to expedite a particular matter, which requires focussed activity or where a more specialist membership is required. The membership of these sub groups would be decided by the Shadow Board and the group would normally have a specific remit and period of operation to oversee or undertake a specific task, reporting directly to the Shadow Health & Wellbeing Board.

8.8 Updating the Terms of Reference

This Terms of Reference can be amended or updated by obtaining a two thirds majority agreement by the Shadow Board. The proposed change should be set out in a report as a published agenda item.