

<b>DRAFT REPORT TO:</b>	<b>HEALTH &amp; WELLBEING BOARD (CROYDON)</b>
<b>AGENDA ITEM:</b>	<b>6 (Also covering Items 3, 4, 7 and 8)</b>
<b>SUBJECT:</b>	<b>ESTABLISHING A HEALTH AND WELLBEING BOARD</b>
<b>LEAD OFFICER:</b>	HANNAH MILLER EXECUTIVE DIRECTOR ADULT SERVICES, HEALTH AND HOUSING
<b>CABINET MEMBER:</b>	<i>COUNCILLOR MARGARET MEAD CABINET MEMBER FOR ADULT SERVICES AND HEALTH</i>
<b>WARDS:</b>	<b>ALL</b>
<b>CORPORATE PRIORITY/POLICY CONTEXT:</b>	
It is statutory requirement to establish a Health and Wellbeing Board.	
<b>FINANCIAL IMPACT</b>	
None for the purposes of this report	
<b>KEY DECISION REFERENCE NO.:</b> n/a	

<p><b>1. RECOMMENDATIONS</b></p> <p>Having regard to the report from Full council and having regard to the Public Sector Equality Duty the Health and Wellbeing Board is asked :</p> <p>1.1 To note that the Council has established a Health and Wellbeing Board (HWB) as a committee of the Council ;</p> <p>1.2 To Note the decision that the maximum number of members is 28 and note the proposal that the Board shall only have 19 voting members and accordingly comment on the proposal from Council to issue a direction that any additional members above 19 will be non voting members.</p> <p>1.3 To appoint a Chair and Vice Chair.</p> <p>1.4 To appoint the persons set out in appendix 2 as members of the Board.</p> <p>1.5 To appoint an Executive Group consisting of Hannah Miller, Paula Swann, Mike Robinson and a Healthwatch representative</p> <p>1.6 To Note the requirement for disclosures of interest</p>
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## **2. EXECUTIVE SUMMARY**

- 2.1 This report informs the Board that the Council has established a committee of 19 Voting members and nine(9) non voting Members as the HWB and notes that the Council has established the rules of procedure. Twelve (12) of these nineteen(19) are statutory and have been appointed. The report asks the HWB to appoint seven (7)additional voting members and to comment on the Council's proposal to the Board that the Council intends to direct that there be 9 non voting members on the board in addition to the 19 Voting members. The committee is asked to agree the nominated non voting members conditional on the council decision on non voting status. The HWB comment will be taken into account when the council makes their decision.
- 2.2 The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 (the Regulations) have confirmed in relation to HWB's:
- the disapplication of political proportionality requirements;
  - modifications or disapplication of voting restrictions;
  - the application of the new ethical framework in relation to declaration and disclosure of interests;
  - the continued application of the transparency provisions in relation to public admission to meetings and access to papers.
- 2.3 A number of the new arrangements are provided for by the Regulations which making amendments to primary legislation that apply specifically in relation to HWB's.

## **3. DETAIL**

- 3.1 The Health and Social Care Act 2012 ("The HSCA 2012") received Royal Assent on 27 March 2012. The Act sets out the ambition for the NHS to become 'democratically accountable' through changes in the way health services are commissioned and delivered.
- 3.2 One of the key aspects of the reform is that local authorities in England will take over the responsibility for health improvement of local populations. Primary care – that is, the responsibility for treating illness – will remain with the NHS. The new duties which local authorities are taking on include the appointment of a Director of Public Health (already appointed), the transfer of Public Health functions to the Council (in progress) the commissioning of a local HealthWatch group [the equivalent of what is currently known as LINK](in progress) and the setting up of a Health & Wellbeing Board (HWB) to provide collective leadership to improve health and wellbeing for the local area. This is the subject of this report.

3.3 With the abolition of Primary Care Trusts (PCTs) in April 2013, it will fall on the HWB to provide a means of integrating all aspects of health and social care in the Croydon area. It is to be noted that the HWBB is not a delivery committee. It is a strategic planning board.

### 3.4 Membership

3.4.1 The table below sets out the categories and statutory framework for membership of the Board. The maximum number for the Board is 28(twenty eight) of which 9 (nine) will be proposed as non voting.

Category	Statutory source	Status or description of representative	How many proposed
1	Croydon Council 194(2)(a)and 194(4) - Leader	The Leader of the Council and/or at least one other Councillor as Council nominee	5 Councillors. 3 Majority party and 2 Minority party. <b>voting</b>
2	Croydon Council 194(2)(b) – ex officio	The Director Of Children Services for the LA	One(1) <b>voting</b>
3	Croydon Council 194(2)(c) –ex officio	The Director of Adult Social Services for the LA	One (1) <b>voting</b>
4	Croydon Council 194(2)(d) – ex officio	The Director of Public Health for the LA	One (1) <b>voting</b>
5	Health Watch 194(2)(e)	<b>A</b> representative of the Local Healthwatch organisation for the area of the local authority	One(1) <b>voting</b>
6	Clinical Commissioning Groups 194(2)(f)	<b>A</b> representative of each relevant Clinical Commissioning Group	Two (2) <b>voting</b>
7	Other <b>persons</b> or <b>representatives of persons</b> as the local authority think fit 194(2)(g)	After the Board is established appointments under this category must be in consultation with the Health and Wellbeing Board 194(9)	None, for the time being (0)
8	Such additional <b>persons</b> as the Health and Wellbeing Board think appropriate 194(8)	They do not have to be representatives of any organization but could be	Sixteen(16) – seven(7) <b>voting</b> and nine non voting
9	National Commissioning Board	NCB must appoint a representative to participate in preparation	One (1) <b>voting</b>

	appointments 197(2) and 197(4).	of JSNA or strategy and a representative on request of HWBB and on its own volition	
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Notes

**Under category 1(5 Councillors)** – the Leader of Croydon Council has nominated **5 Councillors** (3 Majority and 2 minority) Councillors. The Leader himself will not be a member of the Board

**Under category 2,3,4 and 6(5 members)** - these are statutory ex officio posts. The CCG will have two representatives one of which will be a clinical lead

**Under category 5(Healthwatch)** – **one** representative

**Under category 7(Nil members)** – the Council has decided that it will not appoint any persons under this category for the time being

**Under category 8(total 16 members –9 non voting)** – the HWB is recommended to make appointments as set out in Appendix

Although currently not on the shadow Board it is proposed that consideration be given to inviting other groups to appoint non voting representatives as follows; one each from Police Service, Croydon College, London Ambulance Service, London Fire and Rescue Service, London Probation Service, Chairs of Partnership Groups(x3) and Faiths Together in Croydon as **non voting members (9 non voting members)**. **The HWB is being consulted on this proposal and if agreed the organisations nominated representatives will be appointed..**

**Category 9 ( one member)** – National Commissioning Board.

### 3.5 Voting

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3.5.1 Regulation 6 provides that a person who is a member of a Health and Wellbeing Board, a sub-committee of such a Board, or a joint sub-committee of two or more such Boards, shall not be treated as a - voting member of that Board or sub-committee unless the local authority which established the Board otherwise directs. Before making a direction under, the local authority must consult the HWB.

### **3.7 Political proportionality**

3.7.1 Regulations 7 provides that the rules relating to political proportionality are disapplied. Authorities will therefore have discretion to decide whether to appoint only from one party or from as many parties as are represented in the Council. The Council has decided to appoint from all the political parties represented on the Council.

### **3.8 Disclosure of Interests**

3.8.1 The rules relating to disclosures of interest should apply to all members of the Board, including statutory officers. The rules are summarised in Appendix and members of the Board will be required to make disclosures of interest.

### **3.9 Rules of procedure**

3.9.1 The proposed rules are intended to correspond in style to the Council Procedure rules and Scrutiny procedure Rules and Cabinet procedure rules in that they will form a separate part of the Council Constitution. It is however intended to make them as self contained as possible in order to avoid unnecessary cross referencing to the main constitutional document.

### **3.10 Access to Information Rules**

3.10.1 The Access to Information Rules which apply to council committees also apply to the Board. This will require that meetings are held in public, public notice is given of the time and place of the meetings and that the agenda and reports for the meeting are dispatched five clear working days before the meeting.

### **3.11 Time of meeting and place of Meetings and Annual number of meetings**

3.11.1 The HWB will meet in the daytime in the afternoon, in the Town Hall, Croydon.. It will meet six times in a municipal year which is May to April. This number can be varied...

### **3.12 Reference of matters to the HWB**

3.12.1 The draft procedure rules make provision for any board member of the HWBB to refer a matter to the Board via the Chair. In other words, to enable the board member to ensure that the matter (where relevant and has been cleared by the Chair as being appropriate) is included in an agenda for and discussed at a meeting of the Board or a sub committee of the Board.

### **3.13 Public questions**

3.13.1 Provision has been made for the public to ask questions orally at the Board meetings and also in writing in advance of a board meeting. It is proposed that the deadline for submitting written questions is fixed at noon 2 days before the meeting

### **3.14 The Executive Group**

3.14.1 Currently, there is an Executive Group which plans and progress chases the work of the Board and proposes a work plan for the Board. It is intended that this group should be formalised. This report recommends to the Board to appoint the Executive Group

### **3.15 Work Plan**

3.15.1 It would be good practice to require the Board to have a work plan. A work plan item is separately on the agenda for this meeting.

3.15.2 This transparent work plan, of when items are expected at the Board for discussion, will allow members of the Board to suggest further items for discussion and may well form the basis of Scrutiny by the Scrutiny committee.

3.15.3 The number and timing of meetings and business to be conducted per year would be reflected in the work plan. There are significant decisions which the Board needs to make in a calendar year including

- Adopting the JSNA
- Adopting the HWB Strategy
- Commenting on the CCG Commissioning Plans
- Commenting on the Council's Commissioning plans
- Commenting on Annual performance of the CCG on the invitation of the NCB
- An opinion on whether Council and CCG have complied with the HWB strategy in implementing their commissioning plans.

The number of meetings agreed to should synchronise with the timings of when these activities are required to be performed.

## **. 4.0 Consultation**

4.1 The proposals contained in this report for non voting co-optees were first taken to the shadow Health and Wellbeing Board on 13 February 2013 for consultation. The Council's initial view is that apart from the core membership (those ex officio appointments and the appointments required to be nominated by the Leader of the Council), the Board itself should make additional appointments to the Board. Any differences between the report to Council and cabinet and this report are due to having regard to the results of the consultation and the views of council on that consultation.

4.2 At that meeting on 13 February the Shadow Board authorized further

consultation. Comments were received from a number of respondents set out below

4.3 **BME Forum** – making representation following concerns that the HWB in its shadow form had inadequate structures to engage the BME communities and this structure is being replicated. Given that the BME community forms 47% of the Borough the BME forum is asking for a place on the Board.

4.4 **Pharmacist** – requested a place on the Board as they are an important element of the Health economy

4.5 **CSVA** –

- No rationale has been given for non voting members- divisive and creates second class status
- How does the Board intend to ensure that membership reflects the diversity of the community
- Why does Croydon College have a place rather than Croydon Schools
- Concern about officers having votes as well as elected members
- How is Executive Group composed
- Prefer one representative from the emergency services rather than a one for each service
- The status of the Board vis a vis CCG and Scrutiny

4.6 **Croydon Museum and Archives** highlighted that the Museum of Croydon galleries, Riesco Gallery of Chinese Ceramics and Local Studies Library & Archives at the Croydon Clock tower offer a range of health benefits for local people.

4.7 These benefits include increasing visitors' quality of life and confidence in learning. Individuals, families, groups and pairs of adults engage with the galleries, enjoying a shared experience which also stimulates conversation. They asked to meet to discuss their role in improving health and wellbeing

4.8 When these views were communicated to the Council, Council took the view that it would be premature to make firm decisions before the Board was legally in existence. However there was recognition that the BME Forum should be considered for a place as a Voluntary sector provider. This report recommends, consistent with the decision to allow the Board to influence its own membership, that the membership of the Board and its structures be reviewed in six months time after the Board has experience of the working with the proposed initial memberships.

Voting/non voting

4.9 The default position is that all members of the board are entitled to vote and are thus voting members. However, the Council may direct that some members be non-voting. This report is that consultation by the Council before it decides whether to issue a direction.. The Board is asked to comment on whether the council should direct that the following if

appointed to the Board should be non voting. The views of the CVSA will be fully considered at that meeting

- Police Service x1
- Croydon College x 1
- London Ambulance Service x1
- London Fire and Rescue Service x1
- London Probation Service x1
- Chairs of Partnership Groups x3
- Faiths Together in Croydon x1
- Pharmacist Representative x1

## **5 FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS**

- 5.1 The cost of facilitating the meetings will depend on the number of meetings held per year, whether the venue will be the Town Hall or alternative venues for hire and level of public attendance which may require additional staff as stewards and the cost of additional security.

## **6. COMMENTS OF THE COUNCIL SOLICITOR AND MONITORING OFFICER**

- 6.1 The Council Solicitor comments that in accordance with s.194 of the Health and Social Care Act 2012, every local authority has a duty to establish a Health and Wellbeing Board. The overarching aims of Health and Wellbeing Boards are set out in section 195:-
- a. to provide collective leadership to encourage integrated working between NHS commissioners, public health and social care services for the advancement of local health and wellbeing;
  - b. to provide advice assistance and support to encourage partnership arrangements (e.g. budget pooling arrangements);
  - c. to encourage providers of “health related services” (e.g. Housing )to work closely with the Board, Social Care Services and Health Service Commissioners.
- 6.2 In particular, HWB’s will have to undertake a Joint Strategic Needs Assessment (JSNA) and develop a Joint Health and Wellbeing Strategy for Croydon (s.192-193).
- 6.3 The requirement of s.194 (11) of the Health and Social Care Act 2012 is that the Health and Wellbeing Board must be *“a committee of the local authority which established it and, for the purposes of any enactment, is to be treated as if it were a committee appointed by that authority under section 102 of the Local Government Act 1972”*. To

comply with the statutory provision the Health and Wellbeing Board must become a committee in its own right rather than a sub-committee, or its work being absorbed by another existing committee.

- 6.4 The Regulations have only just been published and there has not yet been time to consider their provisions in detail but this will be done prior to this report going forward for final decision.

## **7. HUMAN RESOURCES IMPACT**

- 7.1 None for the purposes of this report

## **8. EQUALITIES IMPACT**

- 8.1 Under section 149 of the Equality Act 2010 a public authority must, in the exercise of its functions, have due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it. In the context of establishing a Board this **involves** having due regard, in particular, to the need to encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low. Where the Board takes the view that the Board membership does not sufficiently encourage participation in decision making by protected groups, then the board may use the discretionary powers mentioned above to appoint a Board which is representative.

## **9. ENVIRONMENTAL IMPACT**

- 9.1 None for the purposes of this report.

## **10. CRIME AND DISORDER REDUCTION IMPACT**

- 10.1 There is an emerging link between crime and disorder and mental health, so consideration could be given to how the Council's Community Safety partnership could be involved in the work of the Board. The recommendation to co opt police and probation representatives as non voting members is designed to help the Council meet its obligation under the Crime and Disorder Act

## **11. REASONS FOR RECOMMENDATIONS/PROPOSED DECISION**

- 11.1 It is a statutory requirement to establish a Board.

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## **BACKGROUND PAPERS - LOCAL GOVERNMENT ACT 1972**

No unpublished document was used for the preparation of this report.