Health and Wellbeing Board Hertfordshire



HERTFORDSHIRE COUNTY COUNCIL

HEALTH AND WELLBEING BOARD

TUESDAY 9 DECEMBER 2014 at 10.00am

PROPOSAL TO WIDEN MEMBERSHIP OF THE HERTFORDSHIRE HEALTH AND WELLBEING BOARD

Report of Assistant Director for Health Integration, East and North

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1. Purpose of report

1.1. This report presents a proposal to broaden the Hertfordshire Health and Wellbeing Board's Membership to include representatives from major Herts NHS providers and the Police and Crime Commissioner.

2. Summary

- 2.1. Although the Health and Wellbeing Board is primarily made up of commissioning organisations, it is recognised that the Board has a wider 'system leadership' role with major NHS providers playing a significant part in the change needed to integrate health and social care services where this improves outcomes for people. Recent guidance on the Better Care Fund suggests that plans need to be agreed by major NHS providers. In addition, the Trust Development Authority which sits above non-foundation NHS trusts, has written to providers asking for evidence of links with Health and Wellbeing Boards.
- 2.2. As the largest commissioner for community safety in the county, including Hertfordshire Constabulary, the Police and Crime Commissioner has a key strategy and policy role to play to reduce crime, the perception of crime and prevent crimes against adults at risk. There is also a key link to crime prevention factors including drug crime, alcohol abuse and domestic violence.

3. Recommendation

3.1. That the County Council be requested to approve the proposed change in membership of the Health and Wellbing Board, to include two NHS

provider representatives (one as full member and one as observer) and the Hertfordshire Police and Crime Commissioner.

4. Background

- 4.1. The current board has 14 members, listed in paragraph 4.1. The 2013 King's Fund survey Health and Wellbeing Boards, 'One Year On', showed that 66% of respondents had 13-20 members.
- 4.2. The composition of boards varies but in most cases largely reflects the prescribed core membership set out in the Health and Social Care Act 2012. The same survey shows that 60% of boards have other roles from the community represented on the board, with the main groups being represented being police, community safety and rescue forces.
- 4.3. Appendix A summarises the composition of 8 Health and Wellbeing Boards comparable to Hertfordshire in terms of demography and numbers of residents.
- 4.4. There is no "ideal" number or membership for an effective Health and Wellbeing Board and there is still much variation in membership and operating arrangements to reflect the differences in local communities. However, increasing the number to 17 members and the suggested additional representatives would reflect the general trend as expressed in the King's Fund survey.

4.5 Current Board membership

Chairman: Cabinet Member for Adult Care and Health - County Cllr Colette Wyatt-Lowe

Vice Chairman: Chair of Herts Valleys CCG, Dr Nicolas Small

Chair of East & North Herts CCG, Dr Hari Pathmanathan

Cabinet Member for Children's Services - County Cllr Richard Roberts

Cabinet Member - Public Health & Localism - County Cllr Teresa Heritage

Mayor, Watford Borough Council - Cllr Dorothy Thornhill

Leader, North Hertfordshire District Council - Cllr Lynda Needham

Chair of Healthwatch Hertfordshire - Michael Downing

Director (Herts & South Midlands) NHS England - Dr Jane Halpin

Director of Children's Services, HCC, Jenny Coles

Director of Health & Community Services, HCC, Iain MacBeath

Director of Public Health, HCC, Jim McManus

Accountable Officer, East & North Herts CCG, Lesley Watts Accountable Officer, Herts Valleys CCG, Nicola Bell

5. NHS provider representatives

- 5.1. The county has four main Hertfordshire-based NHS providers with other Trusts based in other counties serving our population – and the Ambulance Trust serving the East of England. NHS Trust Chief Executive Officers (CEO) recommend that it would be good to have representation from both community NHS trusts and acute NHS trusts. It is therefore proposed to offer one Hertfordshire NHS Trust CEO full membership of the Health and Wellbeing Board, with a second invited as an observer who can speak at the discretion of the Chair, but have no voting rights.
- 5.2. Hertfordshire has an NHS System Leader's Group, made up of the Chief Executives of the NHS commissioners and provider trusts. It is proposed that this group be asked to nominate the two CEO provider representatives proposed above.

6. Police and Crime Commissioner (PCC)

- 6.1. The main role of the PCC includes providing the link between the police and communities; receiving all funding for policing and reducing crime; setting strategic direction; power to appoint and remove the chief constable. The Police Reform and Social Responsibility Act 2011 give PCCs responsibility for holding their Chief Constable to account for policing in their force area.
- 6.2. There are also wider functions, including responsibility for delivering community safety in multi-agency partnerships and reducing crime. There are many overlaps linking the role of the PCC and the delivery of the Health and Wellbeing Strategy and tackling health inequalities, including drugs and alcohol, tobacco control (illicit tobacco), domestic abuse, hate crime for people with disabilities, the impact of crime on families, offender and ex offender health needs and targeting access to health services. Hertfordshire is also currently focussed on tackling domestic homicides, pro-active campaigns to keep people at risk safe and support for older people who have been the victims of crime.
- 6.3. If the Board agrees to recommend an extension to its membership, the Leader of Hertfordshire County Council will be consulted and with his agreement, a change to the HWB constitution will be taken to the next full County Council meeting for ratification. New Board members will be formally invited to the next meeting after that agreement, with the System leaders Group asked to nominate their representative as soon as possible.

6.4 It will be important to keep the Membership of the Board under review in light of the upcoming election, which may result in changes to the Board's statutory functions and role. It is also proposed that the Board undertake a comprehensive self-assessment of its effectives in autumn 2015, potentially involving a peer assessment.

Report signe	d off by	Cllr Colette Wyatt Lowe				
Sponsoring HWB Member/s		Cllr Colette Wyatt Lowe (Chair), Nicola				
		Bell, Lesley Watts				
Hertfordshire HWB Strategy priorities		This proposal would support all 9 strategy				
supported by	v this report	priorities				
Needs assessment						
Consultation/public involvement						
Equality and diversity implications						
Acronyms or terms used						
Initials	In full					
		Chief Executive Officer				
CEO	Chief Executive Officer					
CEO CCG	Chief Executive Officer Clinical Commissioning	Group				

Appendix A ITEM 6

Summary of composition 8 similar Health and Wellbeing Boards

	Total	PCC/Police	Care providers	Wider NHS	Other
Cambridgeshire	17	-	-	-	-
Essex	23	-	2 representatives of Non-acute Health and Social Care providers	2 representatives of Acute Hospital Trusts	CVS
Gloucestershire	15	PCC	-	-	District Council Chief Officer and link for Housing
Hampshire	20	PCC	-	-	Voluntary sector representative
Kent	18	-	-	-	-
Oxfordshire	14	-	-	-	-
Surrey	18	Chief Constable, Surrey Police	-	-	-
Wiltshire	21 (10 voting, 11 non- voting)	PCC (voting) Chief Constable (non-voting)	-	Non-voting: Local Medical Committee; Acute Hospital Trusts; Mental Health Trust; Ambulance Service Trust.	-