

TITLE OF REPORT: Role, Function and Membership of the Health & Wellbeing Board

Purpose of the Report

1. To set out some options to inform follow-up discussions on the role, function and membership of the Health & Wellbeing Board so that it is best placed to take forward the key aims of our Health & Wellbeing Strategy and the recommendations of the DPH 2020 Annual Report on inequalities in Gateshead.

Background

2. The Board considered at its last meeting on 11th June an initial report and position statement on a review of the Board's membership. It was noted that:
 - We should take the opportunity to reflect on the role and purpose of the Board to inform the review of its membership.
 - Although much of the Board's membership is defined by legislation, there is scope to add to its membership, recognising the need to think beyond health and care services in order to achieve health outcomes.
 - The Council's constitution states that the Board may itself appoint such additional persons to be members as it thinks appropriate (article 11.02). Appendix 1 sets out the Board's current membership.
 - Addressing the challenges set out in our Health & Wellbeing Strategy will require a more direct focus on the wider determinants of health and wellbeing as suggested by its title 'Good jobs, homes, health and friends'.
 - Addressing the recommendations of the DPH 2020 report on revisiting inequalities will require a specific focus on targeted support for our most disadvantaged citizens i.e. proportionate to need; a focus on creating well-being through our economic recovery work; and ensuring that health equity is central to our whole approach, working with local communities.
 - If the Board is to be well placed to address these challenges, we will need to broaden its membership accordingly.
 - In securing the right balance of membership going forward, there is a need to consider how the following areas of focus can best be represented:
 - housing

- economy
 - maximising household income
 - sustainable and resilient communities
- It will be important that there is clarity on the focus of the HWB in these areas that is distinct from that of other partnership boards such as the new Strategic Housing Board.
3. It was agreed that a further discussion would take place on these issues at its July Board meeting and that some options would be set out to inform these discussions.

Role and Function of the HWB

4. The role and function of the HWB, as set out in the Council's constitution (see appendix 2) draws from its key statutory responsibilities set out in the Health & Social Care Act 2012:
- To assess the needs of the local population and lead the production of a joint strategic needs assessment (JSNA).
 - To produce a joint health and wellbeing strategy for its local population that reflects the JSNA.
 - To promote health and care integration, partnership working and support joint commissioning.
5. The Council's constitution also includes a role for the Board around ensuring the delivery of better health and wellbeing outcomes for children and adults, and to improve the quality of education and care as well as to ensure value for money.
6. Whilst these roles remain relevant today, it is now timely to consider strengthening the wording of the Board's remit to reflect its role going forward. In particular, there is an opportunity to include reference to the role of the Board in the following areas in response to the discussion at the June meeting:
- To provide strategic direction on the wider determinants of health in order to create the conditions where peoples' health and wellbeing is able to thrive.
 - To provide strategic direction on addressing inequalities across our local population through targeted support for our most disadvantaged citizens.
 - To promote equity of health and wellbeing, working with local communities and local partners.
 - To promote the primacy of place in health and care decision making so that it is as close to communities as possible, liaising with broader health and care geographies towards this end.
7. Finally, clarity will be needed on how the HWB will interface with other partnership boards such as the new Strategic Housing Board i.e. to avoid duplication of roles.

It will be important that the role and focus of the HWB is distinct from that of other partnership boards.

Review of the Board's Membership - Scenarios for Consideration

8. In reviewing the Board's membership to enable it to best fulfill its roles and responsibilities, consideration could be given to the following scenarios, which are not mutually exclusive:

Scenario 1:

9. Maintain core membership of the Board as it is currently but add to its associate membership list.

Given the clear focus of our Health & Wellbeing Strategy on the wider determinants of health and addressing inequality, this does not appear to go far enough in securing the required impetus to address key challenges presented by this agenda.

Scenario 2:

10. Expand the core membership of the Board to cover the following areas of focus:
- housing (e.g. a representative could be nominated by the Strategic Housing Board);
 - economy (e.g. a representative that is active in fair employment /good work for all and/or community wealth building agenda);
 - maximising household income (e.g. a representative of Citizens Advice Bureau or similar organisation);
 - sustainable and resilient communities (e.g. a police representative or a representative of an organisation with a track record in building resilience within local communities).

The inclusion of representatives covering some/ all of these areas would provide additional expertise to the Board and could help to facilitate a co-production approach to plans and initiatives at Place. This could also help to avoid a duplication of roles as representatives of these areas could support the interface between the HWB and other partnership boards as need be.

Scenario 3:

11. Establish a broad reference group(s) of organisations that the Board can liaise with and draw upon in developing its response to key challenges linked to its areas of focus going forward.

A broad reference group(s) arrangement would be inclusive and provide a flexible and adaptable approach is securing additional expertise and insight on issues linked to the wider determinants of health/ addressing inequalities etc. However, on its own, it may not provide the impetus needed to secure the step-change in approach and direction that the Board is seeking.

Scenario 4:

12. A hybrid approach is adopted which would see the Board expand its membership to encompass some/ all of the additional areas set out in scenario 2 as well as putting in place a broader reference group(s) as set out under scenario 3 above.

This arguably could provide the best of worlds, so to speak. On the one hand, an expanded Board membership to support its response to key challenges, supported by a wider reference group(s) to provide input to that response at key points as required.

Updating the Membership List

13. Finally, the opportunity can also be taken to update the membership list of the Board e.g. by formally removing South Tyneside NHS FT from the list which reflects the current position in practice.

Recommendations

14. The Health and Wellbeing Board is asked to:
 - (i) Consider its future role and function as set out in this report.
 - (ii) Consider the scenarios set out in this report in coming to a view on its membership going forward.

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Membership of the HWB – Article 11.02 of the Council's Constitution

The Health and Wellbeing Board will consist of 20 members as follows:-

- Eight councillors (including the Chair and Vice Chair)
- Strategic Director, Care Wellbeing and Learning
- Director of Public Health
- Two Gateshead clinical commissioning group representatives (the Chair or Assistant Chair of the Clinical Commissioning Group and one representative at Director level or equivalent)
- A representative of the NHS England
- A representative of the Local Healthwatch
- A representative of Gateshead Voluntary and Community Sector
- A representative of Gateshead NHS Foundation Trust
- A representative of South Tyneside NHS Foundation Trust
- A representative of Northumberland, Tyne and Wear NHS Foundation Trust
- A representative of Gateshead Federation of GP Practices
- A representative of Tyne and Wear Fire and Rescue Service
- Plus an Associate Member of the Board - Chair of the Local Safeguarding Children Board and Adult Safeguarding Board.

The councillors are nominated by the Leader of the Council who can also nominate himself.

The Council may appoint such other persons or representatives as it thinks appropriate having consulted the Health and Wellbeing Board.

The Health and Wellbeing Board may itself appoint such additional persons to be members of the Health and Wellbeing Board as it thinks appropriate.

Role and Function of the HWB - Article 11.03 of the Council's Constitution

The Health and Wellbeing Board will have the following roles and functions:

- a) to lead on the production of the Joint Strategic Needs Assessment and Pharmaceutical Needs Assessment;
- b) to lead on the production of a Joint Health and Wellbeing Strategy;
- c) for the purpose of advancing the health and wellbeing of children and adults in Gateshead, encourage integration in the provision of health, education and social care in its area;
- d) provide such advice, assistance or other support as the Health and Wellbeing Board considers appropriate for the purpose of encouraging the making of arrangements under Section 75 of the National Health Service Act 2006 and the Children and Social Work Act 2017 in the provision of health and social care services;
- e) to encourage persons who arrange for the provision of any health-related services in its area to work closely with the Health and Wellbeing Board;
- f) to encourage persons who arrange for the provision of health, education and social care services in its area and persons who arrange for the provision of any health-related services in its area to work closely together;
- g) provide an opinion to the Council on whether the Council is complying with its duty to have regard to the Joint Strategic Needs Assessment and the Joint Health and Wellbeing Strategy;
- h) to exercise any other function that the Council requires the Health and Wellbeing Board to undertake on behalf of the Council; and
- i) to ensure the delivery of better health and wellbeing outcomes for children and adults, and improve the quality of education and care as well as to ensure value for money.