

Title	Buckinghamshire Health and Wellbeing Board Governance Review 2018 and Draft Terms of Reference
Date	3 May 2018
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Purpose of this report:

To provide a summary from the 2018 Health and Wellbeing Board (HWB) Governance Review and draft updated Terms of Reference for agreement by the Board.

Summary of main issues:

The Board agreed at the December 2017 meeting that it would be timely to review the HWB governance arrangements to provide the Board with the required assurance that the right structures, relationships and accountabilities are in place across the health and care system to achieve the shared ambitions set out in the [Joint Health and Wellbeing Strategy](#) and alignment of integration plans in Buckinghamshire and make improvements to the way the HWB operates.

The HWB Governance review workshop took place in February 2018 and the high level outcomes have been shared with HWB members prior to the paper coming back to the Board for agreement.

Key recommendations for the Board:

- 1. Terms of Reference (TOR):** Given current transformation of health and care services both nationally and locally, it is recommended that the changes to the HWB TOR for 2018/19 are light touch with the caveat that the HWB will look at the TOR on an annual basis. A draft TOR is included as an appendix for agreement.

At this stage it is recommended that the HWB does not change or increase the membership of the board but continue to welcome key stakeholders and wider partners to attend public meetings and pro-actively invite relevant stakeholders to attend and/or present on specific agenda items.

- 2. Strengthen relationships with the boards delivering the priorities of the Joint Health and Wellbeing Strategy,** specifically the Children's Partnership Board, the Integrated Commissioning Executive Team (to be reviewed as structures change) and the Healthy Communities Partnership Board to enable the board to focus its efforts on the Joint Health and Wellbeing Strategy, and areas where it can add value.

The board should also further utilise the joint protocol arrangements between the other three strategic boards (Buckinghamshire Safeguarding Children Board, Buckinghamshire Safeguarding Adults Board and the Safer Stronger Bucks Partnership Board) and the bi-annual Joint Chairs meetings to progress work on shared issues, included joint hosting of engagement events.

3. **Strengthening Communication and engagement:** More work needs to be done to raise the profile of the boards work and ensure effective engagement and communication with the public, voluntary sector and key stakeholders.
4. **Continue to work to provide clarity to the Boards interface with the Sustainability and Transformation Partnership (STP) and Integrated Care System (ICS):** It is recognised that governance and plans for STP and ICS is evolving and the Health and Wellbeing Board has a key role to play in whole system oversight and democratic accountability. The Board needs to make sure its governance aligns with the on-going ICS governance review and keep a watch on what is happening nationally. The Board should look at aligning governance further in 2019.

The Board is asked to:

- 1) Agree the key recommendations and proposals for developing the Health and Wellbeing Board included in the report.
- 2) Agree the draft terms of reference

1. Background:

Buckinghamshire's Health and Wellbeing Board is the system wide forum with democratic accountability for the health and wellbeing of all residents in the county. It is required to provide leadership and direction over a complex health and care system at time when it is operating under significant pressures combined with increased need and demand for local services.

Following the last governance review and board development sessions in 2015/16 the board has implemented a number of changes and developments, including:

- In 2016 key providers Buckinghamshire Healthcare NHS Trust and Oxfordshire Health Foundation Trust and District Council members were invited as members of the Board
- The refresh of the [Joint Health and Wellbeing Strategy 2016 -2021](#) (JHWBS) was re-focussed to include a stronger emphasis on *place, mental health and reducing health inequalities*.
- The Board introduced a performance dashboard in 2017 to support delivery of the JHWBS and provide focus to the HWB work programme.
- The Board agreed the [Buckinghamshire Health and Social Care Integration Roadmap to 2020](#) in March 2017 which sets the future direction for integration in Buckinghamshire.
- The Board joint hosted a Health and Social Care Integration Summit in November 2017.

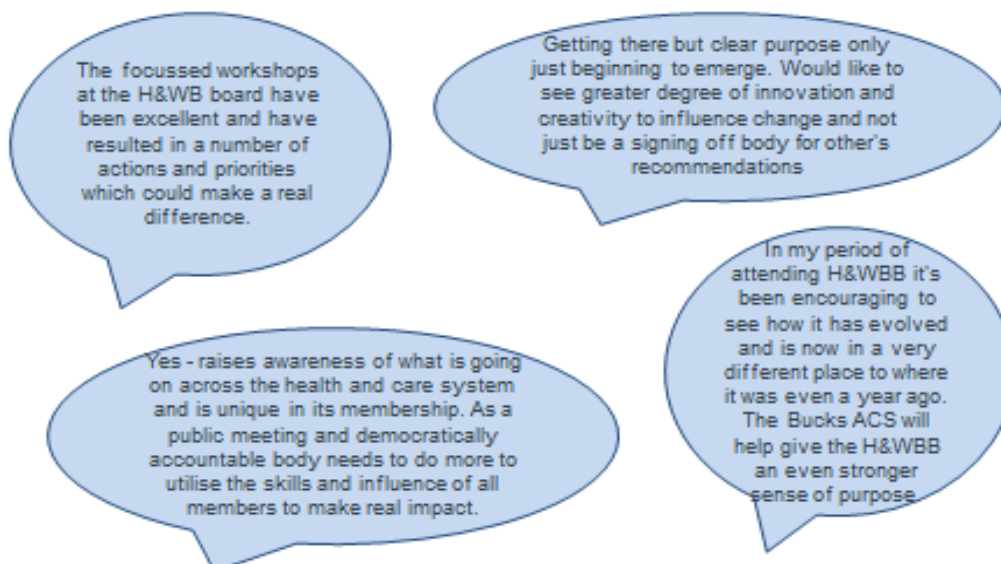
In light of the continued changes to health and care at a local, regional and national level, and the announcement in June 2017 of Buckinghamshire as one of the first wave of Integrated Care Systems in the country, the Board agreed it would be timely to review the Health and Wellbeing Board governance arrangements at its December 2017 meeting.

As a first step, the Board carried out a survey of members in January 2018 and held a governance review and development workshop in February 2018. The working group included representatives from all board member organisations. The aim of the session was to provide assurance to the HWB on governance arrangements, update the Terms of Reference, and consider future areas for development. A summary of the findings are covered in this report.

2. Headlines from the 2018 HWB survey:

Summary of questions and responses:

1. Does your Board make a difference? If so, in what way?



What are the key strengths of the Health and Wellbeing Board?	What are the key challenges for the Health and Wellbeing Board?
The key players in the health and care system are represented. A strategy and process for measuring impact are in place.	Disseminating information back in a timely way to all the different organisations at various levels.
Independent oversight and challenge by the chair and partners of each other	Liaison with key service providers, especially social care and health.
Working in partnership to address the priorities identified collectively to keep children safe in Buckinghamshire.	Better engagement with the Police, South Central Ambulance Service, Fire Service voluntary sector and encouraging more public participation and attendance.
High level overview of a range of projects /initiatives delivering the Joint Health and Wellbeing Strategy priorities identified.	Contribution from all members and collective input to deliver and set clear actions following every meeting
Commitment and contribution to the board by members, from a broad selection of agencies, third sector and lay members	
Different views and perspectives from all relevant agencies are represented and respected. There is no such thing as a silly question and everyone is able to confidently participate and challenge when required	
We are there for a common purpose. People want to make progress.	
Chair's leadership supported by effective and experienced executive support.	

3. Taking the recommendations forward and future planning:

The Governance Review working group discussed the survey results and current areas where more could be done to improve the functioning of the Health and Wellbeing Board.

The working group considered frequency of meetings, agenda planning and membership:

It was suggested that:

- The Board move to quarterly meetings in public similar to other national boards
- The Board holds additional meetings in private to include an agenda planning meeting and/or development sessions.
- The Board to look at supporting/ jointly hosting events to engage the public and key stakeholders on cross cutting agendas

On membership:

- The working group discussed increasing membership to include blue light services and wider stakeholders but also considered whether there was a better way of engaging key stakeholders through invites to specific meetings and relationships with other boards (for example through the joint protocol with the Adult and Children Safeguarding Boards and Safer Stronger Bucks Partnership Board).
- On discussion with board members it was agreed to retain the current membership for the time being which is closely aligned with statutory guidance, with the caveat that this would be reviewed annually.

Place Leadership

The review group considered the LGA sponsored report, '**The Power of Place – Health and Wellbeing Boards in 2017**' which assessed how boards were operating nationally and identified the decision by a significant number of boards to reassert a focus on the wider determinants of health and exercise a place leadership role, "The HWBs which have adopted this route see themselves as developing a wider and longer term place perspective that provides a strategic framework for more immediate and more narrowly focused activity, which can help boards avoid the trap of "tick box sign off" of work that has been led elsewhere."¹

The working group were keen to utilise the emphasis on place in the refreshed Joint Health and Wellbeing Strategy to take a similar approach in Buckinghamshire and look at the possibility of supporting work in specific localities. Members of the working group also felt that the Health and Wellbeing Board had a role in preparing for the impact of considerable growth in the county. Buckinghamshire's population is growing at a greater rate than England or the South East with the population predicted to grow by 16% to 621,900 people from 2016 to 2039. This growth will have a significant impact on local services and infrastructure and should be a regular topic at HWB meetings.

¹ The Power of Place – Health and Wellbeing Boards in 2017 (Shared Intelligence) <https://www.local.gov.uk/sites/default/files/documents/The%20power%20of%20place%20health%20and%20wellbeing%20boards%20in%202017.pdf>

The working group suggested that the Board focus its efforts on the Joint Health and Wellbeing Strategy and areas where it can add value while still retaining a strategic view of the Health and Care transformation to provide democratic accountability, and making sure it is not duplicating work carried out elsewhere.

4. Recommendations and proposed actions:

The working group considered the Top Ten tips for Health and Wellbeing Boards included in the *Power of Place* report and these have been used to consider how the board can implement the recommendations.

Recommendation and focus	How?	Implementation 2018 –19
<p>1. Terms of Reference (Development of the Board)</p>	<ul style="list-style-type: none"> • Devote time and effort to partnership development • Hold a reflective session at least once a year. • Review the membership of the board as its role evolves • Develop a style and culture of constructive challenge. • Think about the board as being the centre of a network rather than just a meeting 	<p>The Board has agreed to hold four public meetings a year and two sessions in private to include agenda planning, reflection and board development topics.</p> <p>The Board to review its TOR on an annual basis</p> <p>The Terms of Reference have been updated to include more emphasis on the role of members.</p>
<p>2. Strengthen relationships with the boards delivering the priorities of the Joint Health and Wellbeing Strategy</p>	<ul style="list-style-type: none"> • Develop a broad, place focus that goes beyond specific conditions and health and care integration and create a strong place-based narrative. 	<p>The Health and Wellbeing Board to carry out work over 2018/19 to formalise the relationship with the boards delivering the priorities of the Joint Health and Wellbeing Strategy to include annual updates and reports as well as priority reporting from the Joint Strategic Needs Development Group.</p> <p>The September 2018 HWB meeting has a community and place focus and will provide the Board with the opportunity to consider what more needs to be done.</p>
<p>3. Strengthening Communication and engagement</p>	<ul style="list-style-type: none"> • Develop a mechanism for effective engagement with partners 	<p>The Terms of Reference have been updated to include more emphasis on engagement. The Board continue to jointly host engagement events</p>

		<p>(Domestic Abuse event proposed for autumn 2018)</p> <p>The Board raises the profile of its work through existing channels (Health and Social Care Comms Group and Integrated Care System stakeholder groups).</p> <p>The Board looks at a way to measure engagement with the public to be included in the performance dashboard (It was agreed at the March 2018 meeting that Healthwatch would lead on this area of work with support from public health colleagues).</p>
<p>4. Continue to work to provide clarity to the Boards interface with the Sustainability and Transformation Partnership (STP) and Integrated Care System (ICS):</p>	<ul style="list-style-type: none"> • Alignment of governance processes across the system 	<p>The Board to continue its strategic oversight of STP and ICS plans at Board meetings.</p> <p>In recognition that plans for the STP and ICS are evolving at pace. The Board will continue to have strategic oversight and updates at HWB meetings and it is recommended that the HWB hold a development session in early 2019 to consider this recommendation further.</p>

5. Next Steps

The Board is asked to:

- 1) Agree the key recommendations and proposals for progressing the development of the Health and Wellbeing Board included in the report.
- 2) Agree the draft terms of reference

If agreed, recommendations and actions from the working group will be actioned and added to the Health and Wellbeing Board work programme. Once agreed, depending on any other further comments. The new Terms of Reference will be published on the HWB webpages.

Appendix 1:

Buckinghamshire Health and Wellbeing Board Terms of Reference Draft May 2018

1. Purpose

Buckinghamshire's Health and Wellbeing Board was established in 2013. It brings together local councillors, local GPs, senior managers in the local authority and NHS, and a representative of local people through Healthwatch to improve the health and wellbeing of all people in the county.

2. Principles

1. To drive whole system leadership and set and hold the vision for health and social care across Buckinghamshire
2. A focussed strategic partnership board to deliver improved outcomes
3. Oversight of the delivery of the priorities and commissioning strategies of the organisations to support the delivery of the health and wellbeing strategy
4. To deliver its statutory responsibilities

3. The Health and Wellbeing Boards statutory responsibilities

- **To prepare a Joint Strategic Needs Assessments (JSNA)** and Joint Health and Wellbeing Strategies (JHWS), a statutory duty of local authorities and clinical commissioning groups (CCGs).
- **To encourage integrated working between health and social care commissioners**, including providing advice, assistance or other support to encourage arrangements under section 75 of the National Health Service Act 2006 (i.e. lead commissioning, pooled budgets and/or integrated provision) in connection with the provision of health and social care services.
- **A duty to sign off the Better Care Fund (BCF)** The Department of Health requires that the Better Care Fund be jointly agreed Health and Wellbeing Boards, Clinical Commissioning Groups and Local Authorities with Adult Social Care responsibilities. They should align with all organisations' existing strategic plans to ensure that all partners support the proposals for integration.
- **Producing a pharmaceutical needs assessment:** This was formerly a responsibility of the primary care trust but the Health and Social Care Act 2012 transfers responsibility for the developing and updating of PNAs to health and wellbeing boards.
- To use its power of influence to encourage closer working between commissioners of health-related services and the board itself.
- To use its powers of influence to encourage closer working between commissioners of health-related services (such as housing and many other local government services) and commissioners of health and social care services.
- Any other functions that may be delegated by the council under section 196(2) of the Health and Social Care Act 2012.

4. Membership

The membership is made up of the key partners involved in the promotion of public health together with the commissioners of health and wellbeing services in the county, including relevant elected members and representatives of wider stakeholders.

- Leader of the Council (Chairman)
- Lead Member for Adults, Health and Communities
- Lead Member for Children and Young People
- Strategic Director of Adults, Health and Communities, BCC
- Strategic Director of Children and Young People, BCC
- Director of Public Health, BCC
- 1 Buckinghamshire Clinical Commissioning Group (CCG) Management Director
- xxx CCG representatives
- Healthwatch Bucks nominated representative
- 4 District Council Representatives
- 1 Representative from Buckinghamshire Health Care NHS Trust
- 1 Representative from Oxfordshire Health Foundation Trust

- National Commissioning Board Representatives (to be invited as required)

Other members of the board may be co-opted and invited to meetings as required by specific agenda items.

Quorum: At least 3 members of the following: 1 Elected Member of the County Council & 1 other Council Representative, 1 CCG management director

5. Meeting Arrangements

Frequency

- The Board will meet four times in public per year as a minimum, with the flexibility for development sessions and agenda planning sessions held in private. The Chairman and Vice-Chair shall be responsible for agreeing meeting dates.

Chairmanship

- The Leader of Buckinghamshire County Council will be Chairman of the Board with the Vice Chair being a nominee of the Clinical Commissioning Group.

- In the event that neither the chairman nor the vice-chair is present but the meeting is quorate, the members present at the meeting shall choose a chairman from amongst their number for that meeting.

Papers

- The Board takes responsibility for its own agenda-setting through an annual planning session and agreement at board meetings.
- The Chairman shall be responsible for agreeing the final meeting agendas and draft minutes for circulation.
- All non-confidential papers will be publicly accessible on the internet.

Substitutes

- Every effort will be made by Board members to attend meetings. However, all organisations represented on the Board will have the right to nominate substitutes to attend meetings.

- The Chairman is responsible for agreeing attendance by anyone who is not a member of the Board.

Secretariat Support

- The County Council shall provide support to the Chairman in setting dates for the meeting, preparing the agenda, and minuting the meeting.

6. Governance and Accountability

- The Board will be accountable for its actions to its individual member organisations.
- Representatives will be accountable through their own organisations' decision making processes for the decisions they take. It is expected that Members of the Board will have delegated authority from their organisations' to take decisions within the terms of reference and constitution of the Board.
- It is expected that decisions will be reached by consensus. Where consensus cannot be achieved, decisions will be made by majority, and the Chairman will have the casting vote.

7. The role of a Health and Wellbeing Board member

- The membership of the Health and Wellbeing Board provides a broad range of perspectives, experience and influence. Members are asked to bring the insight, knowledge, perspective and strategic capacity they have as individuals but must not act simply as a representative of their organisation, but with the interests of the whole of Buckinghamshire and its residents.
- To effectively communicate outcomes and key decisions of the Board to their own organisations, acting as ambassadors for the work of the Board, and participating where appropriate in communications and stakeholder engagement activity to support the objectives of the Board
- Contributing to the development of the JSNA and JHWBS. Ensuring that commissioning is in line with the requirements of the JHWBS and working to deliver improvements in performance against outcome measures within the Health and Wellbeing Board Performance Dashboard.
- Acting in a respectful, inclusive and open manner with all colleagues to encourage debate and challenge.
- Declare any conflict of interest

8. Engagement

- Healthwatch Bucks is the Board's lead for involving Buckinghamshire residents in the Boards work. It is expected that the Healthwatch Bucks representative ensure people's views are included in Board discussions, with elected members also having a role in this regard.
- Formal public meetings will be held four times a year, where it is possible meetings will be webcast. Members of the public are welcome to attend all public meetings. In addition members of the public can ask questions at formal public meetings as set out in the guidance for public questions to the board.
- The Board will hold regular engagement events, open to the public and/or providers. These events will be in addition to the formal, public meetings of the Board and will be a means of:
 - Providing an avenue for members of the public to impact on the Board's work;

- Engaging the public and/or providers in the development of the JHWBS;
- Developing the Board's understanding of local people's and providers' experiences and priorities for health and wellbeing;
- Communicating the work of the Board in shaping health and wellbeing in Buckinghamshire;
- The Board will maintain a website with up-to-date information about its work.

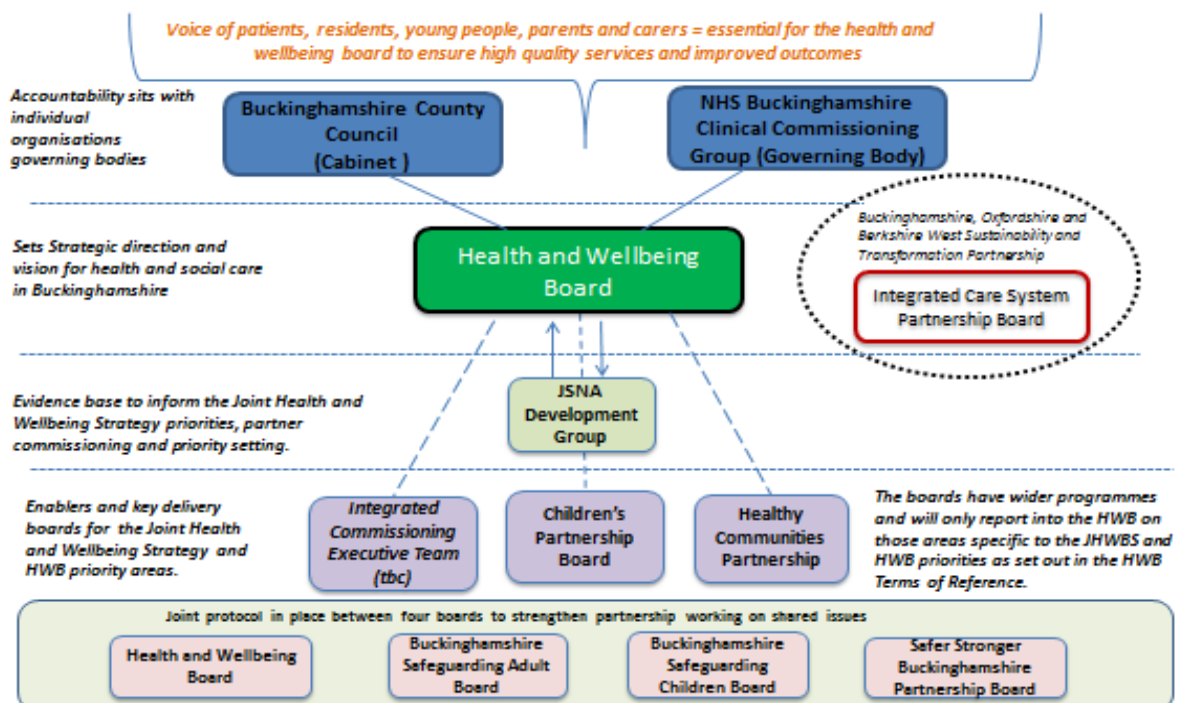
9. Strategic Support

- The Integrated Care Partnership Board will act as a reference group for the Health and Wellbeing Board, providing advice and guidance as required.
- The JSNA Development group will have delegated responsibility for producing the JSNA and presenting regular summaries, assessments and escalating priority health and wellbeing issues to the board.

10. Subgroups and links to other strategic boards

- The Board has set out a partnership map of the boards and groups which have direct links to its work in table 1. This is not exhaustive of the landscape and will be reviewed on an annual basis. The Boards reporting into the Health and Wellbeing Board will share their Terms of Reference and outline their responsibilities to the board.

Table 1: Draft mapping of the proposed high level governance and partnership arrangements related to the Health and Wellbeing Board



Key Influencers: District and Parish Councils, Voluntary Sector, Healthwatch, Health and Adult Social Care Select Committee, Big Tent Engagement Events.