



**FOR PUBLICATION**

**DERBYSHIRE COUNTY COUNCIL**

**GOVERNANCE, ETHICS AND STANDARDS COMMITTEE**

**14 JULY 2022**

**Report of the Director - Public Health**

**Revisions to Health and Wellbeing Board Terms of Reference and Membership**

## **1. Purpose**

- 1.1 The Governance, Ethics and Standards Committee is asked to:
- a) Note the proposed changes to the Health and Wellbeing Board Membership and Terms of Reference that outlines how the Board can work effectively and in partnership with the Integrated Care Partnership.
  - b) Notes the proposed addition of the Derbyshire Integrated Care Board to its membership, as part of the statutory requirements of the Health and Care Bill posed to take affect from 1 July 2022.
  - c) Reviews the revised draft terms of reference, attached as appendix 2, and provide comment and feedback on them so that a final version can be adopted at the Health and Wellbeing Board meeting on 6 October 2022 and approved by Full Council on 30 November 2022.

## **2. Information and Analysis**

- 2.1 Health and Wellbeing Boards were established under the Health and Social Care Act 2012 and have both set functions and a core membership. The statutory requirements of the Board are outlined in the terms of reference.

- 2.2 The statutory membership of the Board includes the following:
- At least one councillor of the upper tier local authority
  - The director of adult social services for the upper tier local authority
  - The director of children's services for the upper tier local authority
  - The director of public health for the upper tier local authority
  - A representative of the Local Healthwatch organisation for the area of the local authority
  - A representatives of each relevant clinical commissioning group (see 2.3 below)
- 2.3 The Health and Care Act (2022) amends the Health and Social Care Act (2012) replacing the representative of the clinical commissioning group with a representative from the Integrated Care Board (amendments 183 and 184). There are also various other requirements relating to the presentation of Forward Plans and strategy documents which will require the Integrated Care Board to engage with the Health and Wellbeing Board formally. This relationship has been described in the revised terms of reference
- 2.4 In advance of the formal launch of the Derby and Derbyshire Integrated Care System on 1 July 2022, the Health and Wellbeing Board has engaged with board members and key stakeholders via development sessions to consider how the role and operating arrangements for the Health and Wellbeing Board. The Board has agreed to evolve further to best meet both statutory and non-statutory requirements and ensure effective health and wellbeing systems leadership at place level within Derbyshire. The outcome of the development sessions are summarised below, and this framework has been utilised to inform the update of the terms of reference:
- 2.5 That the Derbyshire Health and Wellbeing Board should lead on primary and secondary preventative actions and on issues linked to wider determinants as outlined in HWBS. The Board agreed that services linked to HWB partners should be operationalised to support delivery. The Health and Wellbeing Board also proposed that:
- Derby and Derbyshire ICP leads on preventative actions that are clearly linked to health and social care service provision.
  - The ICP supports actions linked to wider determinants.
  - The ICP mobilises services linked to partner organisations to operationalise and support delivery in health and social care space.
- 2.6 In relation to the ICB it was proposed by the Health and Wellbeing Board that:

- the ICB leads on secondary and tertiary prevention from a clinical perspective
- noted that the ICB may support some actions on wider determinants.
- Services linked to ICB members are operationalised to support delivery in clinical space.

2.7 Finally, it was considered beneficial to add in the role of local government, if the ICB represents the wider NHS, and it is proposed that:

- Local authorities lead on primary, secondary and tertiary prevention from a population perspective, with the mix of focus being decided by whether they are a unitary, upper tier or lower tier authority.
- Local authorities will take actions on the wider determinants of health, individually or via collaborative action.
- Services linked to local authorities are mobilised to support preventative action.

### **3. Consultation**

3.1 Health and Wellbeing Board members have until 1 August to provide feedback on the draft terms of reference.

3.2 The Governance, Ethics and Standards Committee is asked to review and provide feedback on the draft terms of reference before a final version is agreed by the Health and Wellbeing Board in October and approved by full council on 30 November 2022.

### **4. Alternative Options Considered**

4.1 Not amend the Health and Wellbeing Board Terms of Reference to reflect recent development discussions and legislative changes. No changes would result in a risk to the Board and Derbyshire County Council as the body responsible for the Health and Wellbeing Board as it would not be compliant with legislation. If other changes were not adopted this may result in ineffective partnership arrangements and may reduce the effectiveness of all partner organisations to support health and wellbeing outcomes for the Derbyshire population.

### **5. Implications**

5.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

### **6. Background Papers**

6.1 [Health and Social Care Bill \(2022\)](#)

**7. Appendices**

7.1 Appendix 1 – Implications

7.2 Appendix 2 – Draft terms of reference

**8. Recommendation(s)**

That the Governance, Ethics and Standards Committee:

- a) Note the proposed changes to the Health and Wellbeing Board Membership and Terms of Reference that outlines how the Board can work effectively and in partnership with the Integrated Care Partnership.
- b) Notes the proposed addition of the Derbyshire Integrated Care Board to its membership, as part of the statutory requirements of the Health and Care Bill posed to take effect from 1 July 2022.
- c) Reviews the revised draft terms of reference, attached as appendix 2, and provide comment and feedback on them so that a final version can be adopted at the Health and Wellbeing Board meeting on 6 October 2022 and approved by Full Council on 30 November 2022.

**9. Reasons for Recommendation(s)**

9.1 The changes to the Health and Wellbeing Board Terms of Reference and membership update the role and function of the Board so that it works effectively within the new Integrated Care System structures which came into effect on 1 July 2022 and reflects Health and Wellbeing Board development sessions which have taken place since April 2022.

**Report Author:** Annette Appleton,  
Ellen Langton

**Contact details:** [annette.appleton@derbyshire.gov.uk](mailto:annette.appleton@derbyshire.gov.uk),  
[Ellen.Langton@derbyshire.gov.uk](mailto:Ellen.Langton@derbyshire.gov.uk)

**Implications**

**Financial**

- 1.1 There are no financial implications associated with the changes to the terms of reference

**Legal**

- 2.1 Health and Wellbeing Board's were established as statutory committee for upper tier local authorities within the Health and Social Care Act (2012). The 2012 Act prescribed core statutory functions and membership of the Board.
- 2.2 The Health and Social Care Act (2022) outlines a number of changes to NHS governance structures, including the requirement for Health and Wellbeing Boards to work alongside Integrated Care Boards and have representation from the Accountable Officer for the Derby and Derbyshire Integrated Care System, replacing the Chief Officer function from Clinical Commissioning Groups.
- 2.3 Member organisations and representatives should identify the process by which they are permitted to approve the term of reference to ensure that any such governance process is followed. They may for example be required to seek approval from a governance group within their organisational structure and this should be completed prior to approval of the draft terms of reference.
- 2.4 The terms of reference of the Health and Wellbeing Board are contained in Article 14 of the Derbyshire County Council constitution. Revision of the terms of reference should therefore be considered and approved by full council once the Board and member organisations have approved these.

**Human Resources**

- 3.1 There are no human resource implications associated with the changes to the terms of reference.

## Appendix 2 Revised Terms of Reference

### Derbyshire Health and Wellbeing Board (HWB) - Terms of Reference and core strategic functions of the Derbyshire HWB

#### Background

Under the Health and Social Care Act 2012 all local authorities are required to establish a Health and Wellbeing Board for its area. The Health and Wellbeing Board is established as a committee of Derbyshire County Council.

The legislative framework for s and wider health and social care system is within the [Health and Social Care Act 2012](#).

#### Vision and objectives

Derbyshire Health and Wellbeing Board has a vision to:

Focus on prevention and the wider determinants of Health so that Board will reduce health inequalities and improve health and wellbeing across all stages of life by working in partnership with our communities.

The objectives of the Board are to enable the residents of Derbyshire to Start Well, Live Well and Stay Well, Age Well and Die Well.

#### Purpose and function

Derbyshire Health and Wellbeing Board must undertake the following statutory functions by:

- Preparing and publishing a JSNA of current and future health and social care needs and ensuring it informs the Health and Wellbeing Strategy and Integrated Care Strategy.
- Promoting integrated working in planning, commissioning and delivery of services to improve the health and wellbeing of the population of Derbyshire and reduce health inequalities and have a preventative focus.
- Preparing and publishing a Pharmaceutical Needs Assessment to assess the need for pharmaceutical services in Derbyshire.
- Preparing and publishing a Health and Wellbeing Strategy for Derbyshire.
- Receiving and responding to to the plan of the Integrated Care Board as proposed in the [Health and Social Care Bill 2021](#).
- Expressing an opinion when an application from pharmacies in Derbyshire where they wish to consolidate or merge.
- Being the accountable Board for the Better Care Fund

These statutory functions will be supported by the following actions:

- Holding organisations and partners to account for delivering against the priorities outlined in the Health and Wellbeing Strategy.

- Ensuring the Health and Wellbeing Strategy has a clear focus on activity linked to primary and secondary prevention, which the Board through the organisations represented on it can lead on.
- Championing prevention and population health as important strategic issues and influencing organisations and partnerships both within and external to ICS to reflect this in their work.
- Working as part of the wider system to address strategic challenges for population health, with a particular focus where appropriate of working collaboratively with Derby City Health and Wellbeing Board.
- Represent Derbyshire in relation to health and wellbeing issues at a regional and national level where appropriate.
- Work closely with the Derbyshire Healthwatch to ensure that appropriate engagement and involvement with patients and service users.
- Ensure that where appropriate system wide delivery plans or shared spaces to collaborate are in place to support the HWBS strategic priorities and outcomes.
- Challenge performance against the outcomes outlined in the HWBS via the HWB dashboard indicators which make links to performance frameworks for the NHS, public health and local authorities.
- Develop mechanisms to measure, monitor and report improvements in health and wellbeing outcomes for Derbyshire.
- Ensure there are effective and appropriate mechanisms to communicate, engage and co-produce health and wellbeing strategy priorities with local people and stakeholders.

### **Membership**

The Health and Wellbeing Board will involve Integrated Care System and wider partners. The Cabinet member for Health and Communities, Derbyshire County Council will Chair the Board and Vice Chair are indicated in the membership list below should the Chair be unable to attend a meeting.

Should neither the Chair nor Vice Chair be able to attend a meeting of the Health and Wellbeing Board, the Chair shall designate another statutory member of the Board as Chair for this meeting. Where this is not possible, a Chair shall be elected at the start of the meeting.

The full Health and Wellbeing Board membership will comprise:

- Cabinet Member for Health and Communities (Chair) (Statutory)
- Accountable Officer for Derby and Derbyshire Integrated Care Board (Statutory) (Vice chair)
- Governing Body Member for Derby and Derbyshire Integrated Care Board (Vice chair)
- Executive Director Adult Social Care and Health, Derbyshire County Council (Statutory)

- Executive Director Children's Services, Derbyshire County Council (Statutory)
- Director of Public Health, Derbyshire County Council (Statutory)
- One representative from Healthwatch Derbyshire (Statutory)
- Cabinet Member for Adult Social Care
- Cabinet Member for Children's Services and Safeguarding
- Chair of 3D to represent the voluntary sector
- One elected member holding a relevant Cabinet portfolio from each district or borough council in Derbyshire
- Police and Crime Commissioner for Derbyshire
- One senior officer representative from Derbyshire Constabulary
- One senior officer representative from Derbyshire Fire and Rescue Service

The Board can co-opt additional members as it considers appropriate in relation to Health and Wellbeing Strategy priorities.

Representatives from NHS England, Public Health England, the UK Health Security Agency, or Office of Health Improvement can attend the Board meetings as required, but in relation to a specific issues or area of interest.

Chief Executives or Senior Officers from district and borough councils may attend the meeting to support district and borough elected members who are formal members of the committee.

Specific officers may be asked to attend one or a series of HWB meetings to provide detailed insight and input to particular topics or issues, such as one of the Health and Wellbeing Board priorities.

The Board membership will be reviewed annually in line with the municipal year.

### **Responsibilities of Board members**

Members should be senior leaders and key decision makers who are able to actively contribute to, and be collectively accountable for, the development and delivery of the Health and Wellbeing Strategy and achievement of our shared ambition to improve population health and wellbeing outcomes and reduce health inequalities.

All members will:

- Endeavour to attend all meetings of the Health and Wellbeing Board as no substitutes will be permitted. If they are unable to attend any actions or issues will need to be raised via liaison with another Health and Wellbeing Board member,



- Fully engage in the Health and Wellbeing Board including active participation in discussions and decision-making relating to all relevant agenda items.
- Propose, as appropriate, agenda items, for information or discussion, to the Health and Wellbeing Board.
- Represent their respective organisations or networks they represent and must take responsibility for communicating all relevant information within their organisation or network.
- Actively progress any strategic decision or action agreed at the Health and Wellbeing through their own organisation and any relevant partners and networks.
- Ensure full support and implementation of the Health and Wellbeing Strategy through their own organisation and relevant networks.
- Ensure their organisations are fully represented and participate in relevant sub-groups and/ or Task and Finish groups as appropriate.
- In addition to the above expectations of all members, it is also the role of the Healthwatch representative to ensure the appropriate representation of the patient, public and carer population.

## **Governance**

### **Agenda Planning**

The Chair and Vice Chairs in conjunction with the Director of Public Health will set the agenda for future s. All Board members will be asked to put forward reports for consideration prior to agendas being finalised. The Board will be updated quarterly on the work of the Derby and Derbyshire Integrated Care Partnership.

### **Reporting**

Reports considered by the Health and Wellbeing Board will need to make a clear recommendation and also demonstrate how they are delivering against Health and Wellbeing Strategy priorities. Reports for information and noting will be circulated electronically to the Board between meetings to ensure that information is shared in a timely manner.

### **Strategic delivery of pieces of work at county wide level**

Work will be delivered by established system groups at a county wide level. The Health and Wellbeing Board will direct and commission specific pieces of work via Board members who will need to action, coordinate and feedback to the Board within agreed timescales.

## **Strategic Task and Finish Groups**

Task and finish groups will be established by exception to take forward key pieces of work for the Health and Wellbeing Board. Task and finish groups will include representatives from Health and Wellbeing Board member or partner organisations and wider stakeholders.

## **Place based delivery**

Derbyshire Locality Health Partnerships will act as a delivery structure, working alongside Integrated Care System Place Alliances, to coordinate delivery of agreed actions and pieces of work.

## **Relationship with other Boards**

The governance diagram at the end of this document sets out the relationship between the HWB and other groups and programmes of work in Derbyshire. If required a protocol document between the Health and Wellbeing Board and other strategic groups will be established to facilitate discussions and delivery against priorities.

## **Meetings of the Board**

### **Frequency**

The Health and Wellbeing Board will meet on quarterly basis.

The date, time and venue of meetings will be fixed in advance by the Board and an annual schedule of meetings will be agreed.

Meetings will normally take place at County Hall, Matlock unless the Board is required to visit another venue or participate in a joint session with Derby City. The Board is a statutory committee of the council and therefore it is required to meet in person.

Additional meetings may be convened at the request of the Chair or Vice Chair.

### **Attendance**

Attendance of Health and Wellbeing Board meetings will be monitored and fed back to the Health and Wellbeing Board annually.

### **Development sessions**

In addition to the formal public meetings, the Board will hold regular development sessions – both as a Derby Health and Wellbeing Board and jointly with Derbyshire Health and Wellbeing Board as appropriate. Development sessions will be held in private to support specific issue focused discussion and learning, ongoing review of Board functioning and active development of the Board and its members.

## **Voting**

At this stage of its development the HWB will operate on a consensus basis. If a vote is required it will be amongst the statutory members of the Board only.

## **Declaration of Interests**

Any interests held by members or co-opted members should be declared on any item of business at meeting in accordance with the Council's Code of Conduct for Members and the Localism Act 2011.

## **Quorum**

A quorum of five will apply for meetings of the HWB, with at least three statutory members present.

## **Access to Information/Freedom of information**

The Board shall be regarded as a County Council committee for access to information purposes and meetings will normally be open to the press/public.

## **Public questions**

Public questions must be tabled 3 working days in advance and in line with the procedures for Full Council and will be considered at the Chair's discretion to ensure they are relevant to the work of the Health and Wellbeing Board. Questions must be asked exactly as submitted, and no supplementary questions are allowed.

## **Board papers**

The agenda and supporting papers shall be circulated at least five clear working days in advance meetings and published on the County Council website.

Minutes will be published on the Derbyshire County Council website.

## **Scrutiny**

Decisions of the Health and Wellbeing Board will be subject to scrutiny, but will not be subject to the "call-in powers" of the Improvement and Scrutiny Committee.

## **Secretariat**

The Secretariat role will be provided by Council Democratic Services. This role will include minute-taking and distribution, administration of all agenda items and associated papers. Democratic Services will be supported with co-ordination and operational assistance by Public Health officer staff.

## **Review**

These terms of reference will be reviewed annually or earlier if required.

# HWB Governance arrangements

