

COUNCIL



Report subject	Health and Wellbeing Board
Meeting date	16 July 2019
Status	Public
Executive summary	The Council is asked to approve the establishment of a Health and Wellbeing Board for the BCP area taking account of the proposed business protocol, membership and terms of reference as set out at Appendix 1 and 2 to the report.
Recommendations	<p>It is RECOMMENDED that Council:</p> <ul style="list-style-type: none">a. Agrees the meeting and business protocol, including the proposed membership of the Board as set out at Appendix 1 to the report acknowledging that the Board may wish to review the membership to include an invitation to Dorset Police Force and Dorset and Wiltshire Fire and Rescue Service representatives to be full or co-opted members.b. Agrees the terms of reference for the Board as set out at Appendix 2 to the report.c. Acknowledges that the first meeting of the new Health and Wellbeing Board will be held on 24 July 2019 at which the Board will review both Appendix 1 and 2 and submit any proposed amendments as appropriate to reflect its key strategic objectives.
Reason for recommendations	To ensure the Council is compliant with the relevant legislation in establishing the Health and Wellbeing Board for the BCP area that reflects its key strategic objectives.

Portfolio Holder(s):	Councillor Vikki Slade, Leader of the Council.
Corporate Director	Jan Thurgood, Corporate Director, Adult Social Care
Contributors	Judith Ramsden, Corporate Director, Children's Services Kate Ryan, Corporate Director, Environment and Community Tim Goodson, NHS Dorset Commissioning Group Sally Sandcraft, NHS Dorset Commissioning Group Sam Crowe, Director Public Health Karen Tompkins, Deputy Head of Democratic Services
Wards	All Wards
Classification	For Decision

Background

1. The Health and Social Care Act 2012 established the requirement for Health and Wellbeing Boards to be set up to improve that health and wellbeing of local people, reduce inequalities and ensure that there was joined up working between health and care services.
2. The Council's Constitution indicates that the Council will establish a Health and Wellbeing Board in accordance with the legislative requirements and statutory guidance, and the terms of reference for this Board will be published on the website.

Meetings and Business Protocol

3. Set out at Appendix 1 to the report is a proposed protocol for the operation of the board. This includes the proposed membership of the Board which draws together key strategic partners.
4. It is acknowledged that the Board may invite/co-opt other representatives to attend meetings for specific issues as appropriate to ensure engagement with all relevant partners. The Board will in particular consider whether representatives of the Dorset Police Force and the Dorset and Wiltshire Fire and Rescue Service should be invited to be full or co-opted members of the Board.
5. The first meeting of the Board as been set up for 24 July 2019 and will be followed by an informal development session to consider and develop the objectives and focus for the Board. It is expected that in addition to formal Board meetings there will be themed developments sessions with outcomes fed into the Board as appropriate.

Terms of Reference

6. Set out at Appendix 2 to the report are the proposed terms of reference for the Board.

Summary of financial implications

7. There are no financial implications, support to the Board will be met from within existing resources.

Summary of legal implications

8. To ensure compliance with the statutory requirements for the establishment of the Board.

Summary of human resources implications

9. There are no human resources.

Summary of environmental impact

10. It will be within the scope of the Board to consider and develop partnership objectives and plans in relation to key environmental issues, which impact on the health and well-being of local people.

Summary of public health implications

11. Establishment of the Board ensure that the relevant public health implications are considered through the Board in accordance with the terms of references set out at Appendix 2 to the report.

Summary of equality implications

12. The establishment of this Board will meet the Equality and Diversity requirements which will actively promote improving outcomes.
13. There is potential risk for the Council to be challenged if it is not compliant with the relevant legislation.

Background papers

Published works

Appendices

Appendix 1 – Meetings and Business Protocol
Appendix 2 – Terms of Reference

**BOURNEMOUTH, CHRISTCHURCH AND POOLE (BCP) HEALTH AND
WELLBEING BOARD
MEETINGS AND BUSINESS PROTOCOL**

A. MEMBERSHIP

The membership of the Board will be reviewed and confirmed each year. Set out in section C below is the proposed membership of the Board.

The Board may invite/co-opt other representatives to attend meetings for specific issues as appropriate. The quorum for meetings of the Board shall be 10 including at least two Councillors and two representatives from the NHS.

B. ELECTION OF CHAIR AND VICE CHAIR

The Chair and Vice Chair of the Board will be elected annually at the first meeting of the Board following the Annual meeting of the Council.

C. VOTING RIGHTS

The following members of the Board will have voting rights.

Leader of the Council
Portfolio Holder for Adults and Health
Portfolio Holder for Children's and Families
Portfolio Holder for Housing
Chief Executive BCP Council
Corporate Director, Adult Social Care
Corporate Director, Children's Services
Corporate Director, Environment and Community
Director, Public Health

Chief Officer, NHS Dorset Clinical Commissioning Group
Chief Executive, Poole Hospital and Royal Bournemouth and Christchurch Hospital
Chief Executive, Dorset Healthcare Foundation Trust
Lead Director of Primary and Community Care, NHS Dorset Clinical Commissioning Group
Three GPs/representatives from the NHS Dorset Clinical Commissioning Group
Representative of NHS England and NHS Improvement
One Healthwatch representative (Evolving Communities Community Interest Company)
One Representative of the Bournemouth and Poole Voluntary Services Councils

D. DISCLOSURE OF INTERESTS

In accordance with the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, Members and named substitute Members of the Board will be required to declare any disclosable pecuniary interests in matters before meetings of the Board. All Members and named substitute Members will have received and completed the necessary form giving details of their disclosable pecuniary interests.

E. PUBLIC ISSUES

The Board will conduct its business under the Procedure Rules contained in the Council's Constitution. The Procedure Rules will allow members of the public, subject to certain conditions being met, to appear before the Board to:

- Ask a question
- Present a statement
- Present a petition

In the event of any requests being received from the public to ask a question or to present a statement or petition, the Board will be advised of the relevant procedures at the meeting.

F. MEETINGS, AGENDA BRIEFING SESSIONS AND DEVELOPMENT SESSIONS

The following arrangements are proposed in respect of these matters:

- Meetings of the Board will be held on a minimum of 4 occasions each year. Special meetings of the Board can be arranged if required in consultation with the Chairman and Vice-Chairman.
- Briefing meetings will be arranged as appropriate prior to publication of the Agenda and reports for Board Meetings
- Development sessions will be arranged and agreed with the members of the Board.

Appendix 2

BOURNEMOUTH, CHRISTCHURCH AND POOLE (BCP) HEALTH AND WELLBEING BOARD TERMS OF REFERENCE

The Board will:

1. Act in accordance with its statutory duty promote integration and prevention approaches in improving the health and wellbeing of local residents.
2. Identify health and wellbeing needs and priorities and co-ordinate the development and updating of the Joint Strategic Needs Assessments – JSNAs – and the Pharmaceutical Needs Assessment – PNA.
3. Agree, develop and implement the priorities and outcomes set out in the BCP Health and Wellbeing Strategy, working with existing partnerships where appropriate and periodically refreshing the Strategy in line with evidence in the Joint Strategic Needs Assessment. The Health and Well-Being Board will ensure that it considers all relevant factors in relation to health and well-being including environmental factors, housing, health and other inequalities and ensure a focus on mental well-being in conjunction with good physical health.
4. Contribute to the governance of the Dorset Integrated Care System and work to ensure that the agreed plans of the Dorset Integrated Care System are developed and implemented with positive impact for all people who live, work and visit the BCP area.
5. Encourage integrated working between health and social care commissioners, including providing advice, assistance and other support to encourage commissioning, pooled budget and/or integrated provision in connection with the provision of health and social care services.
6. Encourage close working between commissioners of health -related services and the Board itself.
7. Encourage close working between commissioners of health-related services and commissioners of health and social care services.
8. Discharge any other functions that may be delegated by BCP Council under Section 196(2) of the Health and Social Care Act 2012.
9. Have responsibility for improving health and wellbeing of children and maintain a formal relationship with the relevant Children's Partnerships.
10. Be responsible for developing collaborative working to improve health and wellbeing across the conurbation and ensure there are appropriate links with the Bournemouth, Christchurch and Poole Adults Safeguarding Board.
11. Work cooperatively with the Dorset Health and Wellbeing Board and, where appropriate, agree shared priorities and action.
12. Measure progress against the plans of the Dorset Integrated Care System and the Health and Wellbeing Strategy, to ensure action is taken to improve outcomes when monitoring or performance indicators show that plans are not working.
13. Promote and ensure engagement and communication with relevant stakeholders, patients, people who live and work in the Boroughs including seldom heard groups, particularly in relation to service changes.
14. Deliver its public sector equalities duties as set out in the Equality Act 2010.
15. Produce an annual report outlining what the Board has achieved in respect of the improvement of health and wellbeing, and the reduction of health inequalities for the population of Bournemouth, Christchurch and Poole.