

**Name of meeting:** Corporate Governance & Audit (CGA) and Council

**Date:** 15 July 2022 (CGA) & 7 September 2022 (Council)

**Title of report:** Proposed revisions to the terms of reference for the Kirklees Health & Wellbeing Board

**Purpose of report:** The purpose of this report is to seek approval for the proposed revisions to the Terms of Reference for the Health and Wellbeing Board

<b>Key Decision - Is it likely to result in spending or saving £250k or more, or to have a significant effect on two or more electoral wards?</b>	No
<b>Key Decision - Is it in the <a href="#">Council's Forward Plan (key decisions and private reports?)</a></b>	No
<b>The Decision - Is it eligible for call in by Scrutiny?</b>	N/A
<b>Date signed off by <u>Strategic Director</u> &amp; name</b>  <b>Is it also signed off by the Service Director (Finance)?</b>  <b>Is it also signed off by the Service Director for Legal Governance and Commissioning?</b>	Richard Parry Strategic Director for Adults and Health
<b>Cabinet member <a href="#">portfolio</a></b>	Cllr Musarrat Khan - Health and Social Care

**Electoral wards affected:** N/A

**Ward councillors consulted:** N/A

**Public or private:** PUBLIC

**(Have you considered GDPR?)**

**This report contains no information that falls within the scope of the General Data Protection Regulation**

## 1. Summary

In accordance with The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, if the Council wishes to alter the voting rights and membership the board must first be consulted on any proposed amendments.

On the 30<sup>th</sup> June 2022 the Health and Wellbeing Board, considered and endorsed the proposed amendments to the terms of reference.

## 2. Information required to take a decision

2.1 The national, regional, and local context the Board is operating within has undergone significant changes with the passing of the Health and Care Act 2022. The Act provides a new legislative framework to facilitate greater collaboration within the NHS and between the NHS, local government, and other partners, and to support the recovery from the pandemic.

2.2 Health and Wellbeing Boards will remain in place and will continue to have an important responsibility at a local/place-based level to bring local partners together, as well as developing the Joint Strategic Needs Assessment and a Joint Health and Wellbeing Strategy, which both HWBs and ICSs will have to have regard to.

The key provisions of the Act that impact on the Health and Wellbeing Board (HWB) are:

- Establishment of Integrated Care Boards (ICB) and abolition of Clinical Commissioning Groups (CCG), with effect from the 1<sup>st</sup> July 2022. The West Yorkshire ICB will cover Kirklees, Calderdale, Wakefield, Bradford and Leeds.
- The HWB in each local authority area is responsible for preparing a JSNA and a joint health and wellbeing strategy for their populations on behalf of their local authority and, previously their CCG. The Act transfers the responsibilities of CCGs to ICBs.
- ICBs must have regard to relevant joint strategic needs assessments, the integrated care strategy for the local area and the joint local health and wellbeing strategy.
- ICBs must involve each relevant health and wellbeing board in preparing or revising its forward plan setting out how they propose to exercise their functions, including proposals for health services, and action on the ICB's general duties and financial duties.
- NHS England must conduct a performance assessment and publish a report on each ICB covering every financial year. In doing this they must consult each relevant HWB on its views on what the ICB has done to implement relevant joint local health and wellbeing strategies.

2.3 The West Yorkshire Health and Care Partnership is now established as the 'Integrated Care System' and the Partnership Board has been meeting formally since June 2019. The Council is represented by Cllr Pandor and Cllr Kendrick for 2022/23.

2.4 The West Yorkshire ICB will establish 5 place-based Committees, including one for Kirklees. The ICB will delegate significant The ICB Constitution ([link](#)) 'creates the framework for the ICB to delegate much decision-making authority and resources to

our places'. The Council's Chief Executive will be a member of the Kirklees ICB 'place-based' Committee.

2.3 The Health and Social Care Act 2012 set out the core membership that health and wellbeing boards must include:

- at least one councillor from the relevant council
- the director of adult social services
- the director of children's services
- the director of public health
- a representative of the local Healthwatch organisation
- a representative of each relevant clinical commissioning group (CCG)
- any other members considered appropriate by the council

2.4 The current membership as set out in the Terms of Reference was amended in May 2021 ([link](#)). Those changes to membership reflected the shift to a much more collaborative culture which is at the core of both the Kirklees Health and Wellbeing Plan and the NHS Long Term Plan. The report also highlighted other policy changes that have now been enshrined in the Health and Care Act 2022:

- 'primacy of place' which the White Paper recognised as 'most usually aligned with local authority boundaries'
- 'working together to integrate care' - embedding 2 forms of integration
  - within the NHS to remove some of the cumbersome boundaries to collaboration and to make working together an organising principle
  - greater collaboration between the NHS and local government, as well as wider delivery partners, to deliver improved outcomes to health and wellbeing for local people.

### 3. Proposals

3.1 Corporate Governance and Audit Committee and Council are asked to consider and agree the proposed revision to the Terms of Reference for 2021-22, specifically;

- Amending the membership of the Board to
  - reflect the creation of the Kirklees ICB Committee and the abolition of Kirklees CCG. The ICB representatives will be the Independent Chair and the Accountable Officer.
  - include a nominated representatives from a wider range of significant partners, including General Practice, Community Pharmacy, Social Care, West Yorkshire Fire and Rescue Service, the third sector, housing, schools, and the University of Huddersfield.
- Amending the Terms of Reference to
  - Reflect the new governance structures created by the Health and Care Act
  - Clarify the distinct role of the Board in relation to these new structures
  - Ensure the Board is actively engaged with the new structures.

Appendix 1 is the current version with the proposed changes marked with ~~strikethrough~~ text to be deleted, [blue](#) text to be added.

Appendix 2 is a the proposed new version.

## **4. Implications for the Council**

### **4.1 Working with People**

The extension of the membership will enable partners with a wider range of contacts with people who live, work and study in Kirklees to be reflected in the Board's work.

### **4.2 Working with Partners**

The existing partnership arrangements between the council and partners will be strengthened and extended by including a wider range of partners as full members of the Health and Wellbeing Board.

### **4.3 Place Based Working**

All the partners on the Board are committed to strengthening our place-based working arrangements. The Council has recently appointed 9 Lead Councillors for Primary Care Networks and Local Health Improvement.

It is anticipated that place-based working will be a core aspect of the refreshed Kirklees Joint Health and Wellbeing Strategy which is due later this year.

### **4.4 Climate Change and Air Quality**

Whilst the revised Terms of Reference do not specifically reference climate change and air quality it is anticipated that climate change will be a core aspect of the refreshed Kirklees Joint Health and Wellbeing Strategy which is due later this year.

### **4.5 Improving outcomes for children**

The Board has a specific responsibility to provide oversight of the Children and Young Peoples partnership and plan. The inclusion of representatives from schools and the University and making explicit the links with the Children's Safeguarding Partnership will also increase the focus of the Board on improving outcomes for children.

### **4.6 Other (eg Legal/Financial or Human Resources)**

The Board has no decision taking responsibilities for service provision or finance. However, the Board will be represented on the Kirklees Integrated Care Board Committee that will have delegated powers to allocate funding and change service provision.

### **4.7 Financial Implications for the Population**

There are no direct financial implications for the population.

## **5. Consultees and their opinions**

The Health and Wellbeing Board endorsed the revisions to the terms of reference.

## **6. Next steps and timelines**

Following consideration by Corporate Governance and Audit Committee, on the 15<sup>th</sup> July 2022, the report will progress to Full Council on 7<sup>th</sup> September 2022 for approval.

7. **Officer recommendations and reasons**

That the revised Terms of Reference of the Health and Wellbeing Board be approved.

9. **Cabinet portfolio holder's recommendations**

Not applicable

10. **Contact officer(s)**

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11. **Background Papers and History of Decisions**

12. **Service Director responsible**

Julie Muscroft, Service Director, Legal Governance and Commissioning