
BLACKPOOL HEALTH AND WELLBEING BOARD

1.0 Matter for consideration

- 1.1 The Committee to consider a report on the progress of the shadow Health and Wellbeing Board in Blackpool.

2.0 Recommendation(s)

- 2.1 To scrutinise the report, asking questions and making recommendations that are considered appropriate.

3.0 Summary of key issues

3.1 What are health and wellbeing boards?

- 3.1.1 Health and Wellbeing Boards are intended to be a forum for key leaders from the health and care system to work together to improve the health and wellbeing of their local population and reduce health inequalities.
- 3.1.2 Each top tier and unitary authority will have its own Health and Wellbeing Board. Board members will collaborate to understand their local community's needs, agree priorities and encourage commissioners to work in a more joined up way. As a result, patients and the public should experience more joined-up services from the NHS and local councils in the future.
- 3.1.3 Health and wellbeing boards are a key part of broader plans to modernise the NHS to:
- ensure stronger democratic legitimacy and involvement
 - strengthen working relationships between health and social care, and,
 - encourage the development of more integrated commissioning of services.
- 3.1.4 The boards will help give communities a greater say in understanding and addressing their local health and social care needs.

3.2 What will they do?

- 3.2.1 Health and wellbeing boards will have strategic influence over commissioning decisions across health, public health and social care.
- 3.2.2 Boards will strengthen democratic legitimacy by involving democratically elected representatives and patient representatives in commissioning decisions alongside commissioners across health and social care. The boards will also provide a forum for challenge, discussion, and the involvement of local people.

3.2.3 Boards will bring together clinical commissioning groups and councils to develop a shared understanding of the health and wellbeing needs of the community. They will undertake the Joint Strategic Needs Assessment (JSNA) and develop a joint strategy for how these needs can be best addressed. This will include recommendations for joint commissioning and integrating services across health and care.

3.2.4 Through undertaking the JSNA, the board will drive local commissioning of health care, social care and public health and create a more effective and responsive local health and care system. Other services that impact on health and wellbeing such as housing and education provision will also be addressed.

3.3 When will the boards be established?

3.3.1 Health and wellbeing boards are operating in shadow form and will take on their statutory functions from April 2013.

3.4 Who will sit on the boards?

3.4.1 The Health and Social Care Act mandates a minimum membership of:

- one local elected representative
- a representative of local Healthwatch organisation
- a representative of each local clinical commissioning group
- the local authority director for adult social services
- the local authority director for children's services
- the director of public health for the local authority

3.4.2 Local boards will be free to expand their membership to include a wide range of perspectives and expertise, such as representatives from the charity or voluntary sectors.

3.4.3 Membership is not the only way to engage with the work of the boards, all boards regardless of their political or geographic make-up will be expected to ensure that the needs of local people as a whole are taken into account.

3.5 How will local communities be able to get involved?

3.5.1 Boards will be under a statutory duty to involve local people in the preparation of Joint Strategic Needs Assessments and the development of joint health and wellbeing strategies.

3.5.2 Each Health and Wellbeing Board will have a local Healthwatch representative member. Local Healthwatch will have a formal role of involving the public in major decision making around health and social care and its work is expected to feed into that of the Health and Wellbeing Boards.

4.0 Witnesses / representatives

4.1 As requested by the Committee members, the following persons have been invited to

attend the meeting to speak on the matter:

- Councillor Ivan Taylor, Cabinet Member for Health and Wellbeing and Chairman of the Blackpool shadow Health and Wellbeing Board.
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Relevant officer:

Steve Sienkiewicz. Scrutiny Manager.

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Appendices attached:

Appendix 5a, Minutes of the meeting of the shadow Health and Wellbeing Board 19th October 2012.

Background papers:

None