

# CHESHIRE EAST COUNCIL

## Constitution Committee

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<b>Date of Meeting:</b>	20 <sup>th</sup> March 2014
<b>Report of:</b>	Executive Director of Strategic Commissioning Head of Legal Services and Monitoring Officer
<b>Subject/Title:</b>	Health and Wellbeing Board's Terms of Reference
<b>Portfolio Holder:</b>	Cllr. Janet Clowes - Portfolio Holder for Health and Adult Care

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### 1.0 Report Summary

- 1.1 The Health and Wellbeing Board came into existence on 1 April 2013. Its current Terms of Reference were approved by Council on 28<sup>th</sup> February 2013. The Board has had a fruitful first year, overseeing the process of submitting to the Department of Health the successful bid to be a Health and Social Care Pioneer authority (in conjunction with the Cheshire West and Chester Health and Wellbeing Board) and supporting the ongoing integration programmes with the Clinical Commissioning Groups. In addition, the Board has been monitoring the progress of key initiatives such as the Learning Disability Lifecourse Review, the Dementia Strategy and Implementation Review and the work of the Joint Commissioning Leadership Team.
- 1.2 This report makes proposals for some amendments to the existing Terms of Reference. The proposed amendments are highlighted in the Appendix.

### 2.0 Recommendation

- 2.1 That the draft amended Terms of Reference for the Health and Wellbeing Board be recommended to Council for approval.

### 3.0 Reasons for Recommendations

- 3.1 To ensure that the Health and Wellbeing Board's Terms of Reference align with the Council's Constitution and Statutory Guidance and that the Council is compliant with the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.

### 4.0 Wards affected

N/A

## **5.0 Local Ward Members**

N/A

## **6.0 Policy Implications**

- 6.1 The collaborative decision-making approach of the Board is essential to achieving whole system accountability for the improvement of the health and wellbeing of Cheshire East citizens. The amendments suggested to the Terms of Reference by this report will enable the Board to function effectively.

## **7.0 Financial Implications**

- 7.1 None to note in respect of the Terms of Reference themselves.
- 7.2 The Health and Wellbeing Board has no formal delegated authority from any of the statutory bodies in respect of resource decision-making. Therefore, the process for making decisions around resource allocation remains within Board members' respective individual organisations' governance, powers and duties.

## **8.0 Legal Implications**

- 8.1 The Health and Social Care Act 2012 requires the Local Authority to establish a Health and Wellbeing Board for its area. Core membership includes at least one local Councillor (nominated by the Council's Leader) the Directors of Adult Social Services, Children's Services and Public Health, a representative of the Local Healthwatch Organisation and a representative of each Clinical Commissioning Group and the NHS Commissioning Board. The Local Authority, through its other statutory roles, may also nominate such other individuals as they consider appropriate.
- 8.2 The Board was established in April 2013 and is a Committee of the Local Authority under S102 of the Local Government Act 1972. However, the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 modify some of the normal requirements of the Local Government Act 1972 and the Local Government and Housing Act 1989 and the Board is therefore different in its make up to other Committees.
- 8.3 The Terms of Reference for all Committees are included in Cheshire East Council's Constitution. Any amendment therefore to the Terms of Reference is an amendment to the Constitution and requires a referral to the Constitution Committee and the approval of Council.

## **9.0 Risk Management**

- 9.1 Corporate risks have been determined in respect of Health Partnerships, and this is reported to the Corporate Risk Management Group. Failure to enable the Board to modify its vision and objectives in line with current thinking and the needs of the population could impact negatively on the health and wellbeing of Cheshire East

citizens and indeed on the Council's own objectives as set out in the Sustainable Communities Plan and Business Plan for 2013-2016.

- 9.2 The Health and Wellbeing Board has established an initial Risk Register which the Board reviews quarterly.

## **10.0 Background and Options**

- 10.1 The Health and Social Care Act 2012 initiated a number of significant changes that affected the local health and social care landscape. This included the establishment of the Cheshire East Health and Wellbeing Board, the Clinical Commissioning Groups and the transfer of Public Health responsibilities from the Primary Care Trust to the Local Authority. As a result of this legislation, the Authority has a greater role to play now in setting policy, providing system leadership and connecting commissioning activity that will contribute to improved health outcomes for the population of Cheshire East.
- 10.2 The Health and Wellbeing Board was established on 1 April 2013.
- 10.3 The existing Terms of Reference for the Health and Wellbeing Board were drafted in preparation for the Board coming into existence. There was therefore no history or comparator to look to for guidance as to the most appropriate wording for the Terms of Reference. The Terms of Reference as previously approved are therefore comprehensive and provide a sound remit to a new Committee.
- 10.3 The Board will shortly have been in existence for twelve months and has now established itself and begun to identify projects for the future. For the Board to be able to be dynamic and responsive to emerging research and thinking on innovative and effective methods of delivering services to the citizens of Cheshire East it needs to have the flexibility to regularly review its vision and objectives to ensure that they remain relevant.
- 10.4 The Board's Vision and Key Objectives are included in the Terms of Reference which form part of Cheshire East Council's Constitution. Therefore any changes to the Terms of Reference require approval by Council. Vision and objectives are not ordinarily included in a Committee's Terms of Reference and the proposal in this report is that those aspects of the Terms of Reference be deleted.
- 10.4 The Purpose of the Board has been expanded to clarify the functions required of the Board by the legislation. The purpose is set out in statute and captures the essence of what the Board needs to achieve.
- 10.5 Other amendments have been made to update the Terms of Reference in the light of the restructuring of the Council over the last year, the publication of the Statutory Guidance and to incorporate additional wording to ensure the alignment of the Terms of Reference with the Council's Constitution and Committee Procedure Rules.

- 10.6 Paragraph 14.2 has been amended to read 'majority vote' rather than 'unanimous vote'. The requirement of an unanimous vote could cause issues in enabling necessary changes and 'majority' is therefore more appropriate.
- 10.7 The original Appendix 1 has now been deleted as the Draft Governance Model illustrated within it is no longer current.

## **11.0 Access to Information**

The background papers relating to this report can be inspected by contacting the report writer:

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### **Appendix 1**

***Statutory Terms of Reference for the Cheshire East Health and Wellbeing Board***