

CENTRAL BEDFORDSHIRE HEALTH AND WELLBEING BOARD

11 July 2018

Health and Wellbeing Board Membership

Responsible Officer: Richard Carr, Chief Executive
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Purpose of this report

1. To receive a report on the proposed membership of the Health and Wellbeing Board.

RECOMMENDATIONS

The Health and Wellbeing Board is asked to:

- 1. consider and approve the proposed changes to the membership of the Board, prior to formal approval by the General Purposes Committee of the Council.**

Issues

2. The Health and Wellbeing Board was established as a committee of the Council in April 2013 and membership of the Board has not been reviewed subsequently.
3. The Health and Social Care Act 2012 sets out the statutory membership of the HWB as follows:
 - At least one Member of the Council nominated by the Council's Leader;
 - The Council's Director of Adult Social Services;
 - The Council's Director of Children's Services;
 - The Council's Director of Public Health;
 - A representative of the Local Healthwatch organisation
 - A representative of the Clinical Commissioning Group;
 - Such other persons, or representatives of such other persons, as the Council thinks appropriate.

4. In addition, the following members were also appointed to the Board in 2013:
 - Executive Member for Health;
 - Executive Member for Adults, Social Care and Housing Operations;
 - Executive Member for Families, Education and Children
 - Council's Chief Executive
 - Director of Community Services
 - Clinical Leader from the Clinical Commissioning Group
5. Changes to the provider and commissioning landscape and the ambition outlined in the emerging Joint Health and Wellbeing Strategy have prompted consideration of changes required to the membership of the Board.

Options for consideration

6. To ensure that the Board can deliver its functions including the outcomes from the emerging Joint Health and Wellbeing Strategy, it is suggested that membership is expanded to include representatives from the following sectors of the system:
 - Primary Care Practitioner
 - Acute Care (in 2018/19 a representative of each local provider may be required)
 - Mental Health
 - Community Services

The suggestion is that the various organisations operating in each of these areas should be invited to put forward appropriate representatives.

Financial and Risk Implications

7. None

Governance and Delivery Implications

8. Changes to the membership of the Health and Wellbeing Board, as a committee of the Council, will need to be approved by General Purposes Committee.

Equalities Implications

9. The PSED requires public bodies to consider all individuals when carrying out their day to day work – in shaping policy, in delivering services and in relation to their own employees.

It requires public bodies to have due regard to the need to eliminate discrimination, harassment and victimisation, advance equality of opportunity, and foster good relations between in respect of nine protected characteristics; age disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

Implications for Work Programme

10. Consideration should be given to a facilitated development session for the newly constituted Board.

Conclusion and next Steps

11. That the membership of the Board is expanded to better reflect its ambition to improve the health and wellbeing of residents, which is reflected in the emerging Joint Health and Wellbeing Strategy.

Appendices

None

Background Papers

None