

**TO: HEALTH AND WELLBEING BOARD
13 FEBRUARY 2013**

**ROLES OF THE HEALTH AND WELLBEING BOARD, HEALTHWATCH AND SCRUTINY
COMMITTEES**

Director of Adult Social Care, Health and Housing

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to set out the roles and responsibilities of the Health and Wellbeing Board, Healthwatch and those of Scrutiny Committees.

2. RECOMMENDATIONS

The Health and Wellbeing Board is asked to:-

- 2.1 **Discuss and agree the roles and responsibilities of the Health and Wellbeing Board and Healthwatch**
- 2.2 **Recommend that this paper be presented for agreement to relevant Scrutiny Committees.**

3. REASONS FOR RECOMMENDATIONS

- 3.1 The reasons for setting out and agreeing the roles and responsibilities of the Health and Wellbeing Board, Healthwatch and Scrutiny Committees are to ensure:
- Appropriate governance arrangements
 - Defined and agreed accountabilities defined
 - Duplication is avoided

4. ALTERNATIVE OPTIONS CONSIDERED

- 4.1 There are no alternatives to agreeing roles and responsibilities.

5. SUPPORTING INFORMATION

Background

- 5.1 In October, the Health and Wellbeing Board held a development event to create an opportunity for board members, members of scrutiny panels and NHS providers to consider the roles and responsibilities of, and relationship between, the partners. The purpose of the event was to begin to develop a shared vision to ensure clarity of governance arrangements and avoid duplication in order to maximise the impact of the whole system working together for the benefit of the community.
- 5.2 Actions from the event included:

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- Agree priority areas for further work for HWB, Healthwatch and Scrutiny
- HWB to develop a communication strategy on behalf of the partnership

Roles and responsibilities

- 5.3 Councils with social care functions can hold NHS bodies to account for the quality of their services through powers to obtain information ask questions in public and make recommendations for improvements that have to be considered. Proposals for major changes to health services can be referred to the Secretary of State for determination if they are not considered to be in the interests of local health services. Within Bracknell Forest this is done in conjunction with the Executive Member and Council. The way councils use the powers is commonly known as “health scrutiny” and forms part of councils’ overview and scrutiny arrangements. From April 2013, all commissioners and providers of publicly funded health and social care services have been covered by the powers, along with health and social care priorities arising from the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy. Scrutiny also has a pro-active role in helping to understand communities and tackle health inequalities.
- 5.4 The role of health scrutiny is to:
- Evaluate policies arising from processes and decisions and outcomes from services
 - Consider whether service changes are in the best interests of the local health service
 - Carry out pro-active qualitative reviews that can inform and enhance policy and services.
 - Working with Healthwatch to capture the views of people using services to inform their work.
- 5.5 Local Healthwatch is the consumer champion for health and social care representing the collective voice of people who use services and the public in general. Healthwatch will build up a local picture of community needs, aspirations and assets and the experience of people. It will report any concerns about services to commissioners, providers and Scrutiny committees. It does so by engaging with local communities including networks of local voluntary organisations, people who have or are using services and the public. Through its seat on the Health and Wellbeing Board, local Healthwatch will present information for the Joint Strategic Needs Assessment and discuss and agree with other members of the board a Joint Health and Wellbeing Strategy. It will also present information to Healthwatch England to help form a national picture of health and social care. Local Authorities have the responsibility to ensure that the local Healthwatch operates effectively and is value for money; managing this through local contractual arrangements.
- 5.6 The role of Local Healthwatch is to:
- Act as a “watchdog” and advocate for consumers
 - Be a source of information; to share information from networks of voluntary and community groups
 - Gather and present evidence and information for Joint Strategic Needs Assessments and support scrutiny reviews
 - Use good public engagement to demonstrate the “real-time” experiences of people who have experience of using health and social care services
 - Highlight concerns about services to health scrutiny. In line with national

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guidance, Healthwatch has a duty to report concerns to Health Scrutiny. Within Bracknell Forest, it has been agreed that Health Overview and Scrutiny Panel will act as the recipient of the concerns.

- Cascade information to people in the community and the public about services and support that is available.

5.7 The Health and Wellbeing Board is a committee of the council. The membership of the Board includes local councillors, officers of the council, representatives from the NHS and local Healthwatch. The board takes the lead on improving health and wellbeing outcomes and reducing health inequalities for the local community. Although there is a prescribed minimum membership, boards operate differently responding to local circumstances. Health and Wellbeing Boards are an executive function of the council and are responsible for identifying current and future health and social care needs and assets through the Joint Strategic Needs Assessment and developing Joint Health and Wellbeing Strategies to set health and social care priorities.

5.8 The role of the Health and Wellbeing Board is to:

- Set priorities and to drive the development of health and social care within the Borough
- Bring together individual and organisational knowledge, expertise and experience and to act as a system leader
- Develop a strategic, area-wide view of health and social care needs and resources through the Joint Strategic Needs Assessment
- Agree an area-wide alignment of services to deliver improved health and wellbeing through the Joint Health and Wellbeing Strategy
- Facilitate shared understanding of information to improve outcomes from decision making
- Develop arrangements to involve key providers in improved health and social care

5.9 All three bodies have a role in the way local services are planned and delivered. How they interact with each other will have a direct influence on improving outcomes for communities and local people.

5.10 The following basic scenarios are examples, developed by the Local Government Association and the Centre for Public Scrutiny, of how the functions of Health and Wellbeing Boards, Local Healthwatch and Scrutiny might compliment rather than duplicate each other's work:

5.10.1 *Scenario 1: The refreshed JSNA has indicated a need for integrated health and social care teams aligned with GP practices*

Health and Wellbeing Board	The board has a duty to support integrated services and, reflecting on the JSNA, decides to include integrated teams as a priority in the Joint Health and Wellbeing Strategy. Following the implementation of the strategy, it assesses what impact the changes have had and makes recommendations for improvement.
Local Healthwatch	Undertakes local research about what people who use services are looking for, identifies gaps on service provision and feeds the outcomes onto the Health and Wellbeing Board to influence the Joint Health and Wellbeing Strategy.

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Health Scrutiny	Examines the process in light of members' knowledge of the local area and makes recommendations about how people in the community, particularly vulnerable groups, can be informed about changes to services. Depending on the outcomes or any issues raised, scrutiny could consider whether it would merit the establishment of a working group, recognising that there may be competing priorities.
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5.10.2 *Scenario 2: An issue related to health inequalities: A low uptake of child vaccination in particular wards*

Health and Wellbeing Board	The refreshed JSNA indicates a low uptake that has implications for health and social care in some council wards. Because the reasons are unclear, the Health and Wellbeing Board asks Health Scrutiny to review the issue.
Local Healthwatch	Through their seat on the Health and Wellbeing Board, local Healthwatch were involved in reviewing the JSNA, and now it uses its local networks to gather views about why some children are not being immunised and reports this to the Health and Wellbeing Board and Scrutiny.
Health Scrutiny	Scrutiny asks Local Healthwatch to gather local views. As a result of the discussions with Clinical Commissioning Groups, schools, health visitors and social workers, makes recommendations about ways to improve immunisations.

5.10.3 *Scenario 3: A reconfiguration of maternity services across council areas*

Health and Wellbeing Board	Providers have proposed this as a solution to improving outcomes and make better use of available resources. The health and wellbeing board assesses whether the plans fit their Joint Health and Wellbeing Strategy and takes a strategic view on the outcomes and engagement with the clinical commissioning groups.
Local Healthwatch	Undertakes a comprehensive exercise to gather views from people who use services and the public, checks whether consultations reflect what is known about best practice and presents views as a health and wellbeing board member and to council scrutiny during the formal consultation process.
Health Scrutiny	Agrees that proposals are a substantial/significant variation and, either individually or through joint arrangements with other councils, engages in early discussions with the commissioners/providers regarding policy, plans and consultations. During the formal consultation stage it would analyse the proposals in a public forum, taking evidence and coming to a conclusion about whether the proposals are in the best interest of the local health service. This would be in conjunction with key officers and the Executive Member to seek to secure a "council" response to proposals.

6 ADVICE RECEIVED FROM STATUTORY AND OTHER OFFICERS

Borough Solicitor

- 6.1 The relevant legal implications are contained within the main body of the report.

Borough Treasurer

- 6.2 The Borough Treasurer is satisfied that there are no direct financial implications arising from this report.

Equalities Impact Assessment

- 6.3 Any proposals for service redesign will consider the impact on people in the community.

Strategic Risk Management Issues

- 6.4 If roles and responsibilities of the partners are not clear there is a risk of duplication of effort and insufficient capacity to deliver on the priority areas.

7. CONSULTATION

Principal Groups Consulted

- 7.1 Members of the Health and Wellbeing Board, NHS providers and members of scrutiny panels.

Method of Consultation

- 7.2 Workshop held in October 2013.

Representations Received

- 7.3 Representations have been incorporated into this report.

Contact for further information

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