

Bath & North East Somerset Council	
MEETING:	Council
MEETING DATE:	10 November 2011
TITLE:	Health and Wellbeing Board Governance
WARD:	ALL
AN OPEN PUBLIC ITEM	
List of attachments to this report: Appendix 1: Health and Wellbeing Board (shadow) Terms of Reference	

1 THE ISSUE

- 1.1 Bath and North East Somerset (B&NES) is part of the early implementer network of Shadow Health and Wellbeing Boards. This means that we are expected to transition from the current arrangement (Partnership Board) to the Shadow Board by April 2012.
- 1.2 To enable this transition the Council is being consulted on the draft Terms of Reference for the Health and Wellbeing Board (shadow until April 2013).

2 RECOMMENDATION

Council is asked to:

- 2.1 Consider the composition, draft terms of reference and procedure for the Health and Wellbeing Board as contained in the report and,
- 2.2 Offer any comments it wishes to make to Cabinet.

3 FINANCIAL IMPLICATIONS

3.1 There are no financial implications.

4 CORPORATE PRIORITIES

4.1 The Health and Wellbeing Board will become a statutory requirement of the Council under the new Health and Social Care Bill if the Bill becomes law in its current form. The Board will contribute to the following corporate priorities:

- *Building communities where people feel safe and secure*
- *Promoting the independence of older people*
- *Improving life chances of disadvantaged teenagers and young people*
- *Sustainable growth*
- *Improving the availability of Affordable Housing*
- *Addressing the causes and effects of Climate Change*
- *Improving transport and the public realm*

5 THE REPORT

5.1 Bath and North East Somerset (B&NES) is part of the early implementer network of shadow Health and Wellbeing Boards. This means that we are expected to transition from the current arrangement (Partnership Board) to the shadow Board by April 2012. Fully fledged Boards will be up and running in April 2013 at the same time the Clinical Commissioning Groups (CCGs) take on responsibility for the local NHS budget.

5.2 The official transition from Partnership Board to the Health and Wellbeing Board (shadow until April 2013) needs to be approved by Cabinet, in consultation with Council. The proposed terms of reference for the Board are attached at appendix 1. The principles for these terms of reference have been agreed by both the PCT Board and Partnership Board for Health and Wellbeing in June 2011.

6 RISK MANAGEMENT

6.1 A risk assessment related to the issue and recommendations has been undertaken, in compliance with the Council's decision making risk management guidance. The report author and Lead Cabinet member have fully reviewed the risk assessment related to the issue and recommendations, in compliance with the Council's decision making risk management guidance

7 EQUALITIES

7.1 The Terms of Reference will ensure that Board meetings comply with equalities standards for public meeting; this will include ensuring meeting venues are accessible.

7.2 Equalities will form a central part of the Joint Strategic Needs Assessment and Health and Wellbeing Strategy process – statutory responsibilities of the Board.

8 CONSULTATION

8.1 The following have been consulted:

Cabinet members (through the Partnership Board for Health and Wellbeing); Staff; Other B&NES Services; Stakeholders/Partners; Other Public Sector Bodies; Section 151 Finance Officer; Chief Executive.

- 8.2 The proposed Terms of Reference were developed in partnership with the PCT, Democratic Services and colleagues in the People and Communities Directorate. The Terms of Reference have been agreed in principle by the Partnership Board for Health and Wellbeing and the PCT Board.

9 ISSUES TO CONSIDER IN REACHING THE DECISION

- 9.1 The Health and Wellbeing Board (shadow until April 13) will contribute to improving the follow: *Social Inclusion; Customer Focus; Sustainability; Young People; Human Rights;*

10 ADVICE SOUGHT

- 10.1 The Council's Monitoring Officer (Divisional Director - Legal and Democratic Services) and Section 151 Officer (Divisional Director - Finance) have had the opportunity to input to this report and have cleared it for publication.

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Background papers	NA
Please contact the report author if you need to access this report in an alternative format	