

From: Peter Oakford, Deputy Leader, Cabinet Member for Strategic Commissioning & Public Health and Chairman of the Kent Health and Wellbeing Board

David Whittle, Director Strategy, Policy, Relationships and Corporate Assurance

To: Kent Health and Wellbeing Board – 22 November 2017

Subject: **Discussion paper:** Health and Wellbeing Board – proposal to move to a joint board with Medway Council

Classification: Unrestricted

Summary:

This paper is a discussion paper that sets out the reasons that a Joint Health and Wellbeing Board (i.e. a Joint Committee) with Medway Council could be established for the purpose of providing a mechanism for oversight of and engagement in those areas of the Sustainability and Transformation Partnership activity that relate to areas of common interest across both councils, particularly strategic commissioning, prevention and local care work streams.

Recommendations:

The Board is asked to:

- a) Agree to recommend to County Council the creation of a joint Board with Medway Council dependent on agreement from Medway Council, and further discussions with STP Leadership
- b) Agree that the joint Board should focus on the Kent and Medway STP
- c) Agree that membership may include future representation from the strategic commissioner function and ACPs as new structures develop
- d) Delegate to the Chairman responsibility for agreeing Terms of Reference for the joint Board with Medway Council and STP Leadership

1. Introduction

1.1 On September 20th 2017 the Kent Health and Wellbeing Board agreed to explore the creation of a joint board with Medway Council. The purpose of this paper is to provide the foundation for further discussion to support the Board in coming to an in-principle agreement that it does want to develop a joint arrangement. However it should be acknowledged that some of the detail will still need to be addressed and require further negotiation with Medway to reach agreement around the details of operating as one Board.

1.2 Currently KCC and Medway have reached consensus that a Joint Kent and Medway Health and Wellbeing Board could be established in so far as it relates to areas of common interest and for the purpose of advancing the

health and wellbeing of both council's local populations particularly relating to the work taking place in the Kent and Medway Sustainability and Transformation Partnership (STP). The full Council meeting for each authority would have to approve the creation of a joint Board.

- 1.3 STP Leaders have given an in principle agreement that they will support the development of a joint board but further discussion will be required to establish its role and relationship with the STP.

2. The Role and purpose of a Joint Health and Wellbeing Board

- 2.1 The Kent and Medway STP recognises Kent and Medway as a single health and social care economy and both KCC and Medway Council are actively engaged in STP discussions. However, the fundamental nature of the decisions that might arise for both authorities from the STP in regard to the design and delivery of health and social care services for our residents mean there is a need for a joined-up forum across both councils to provide strong democratic voice back into STP planning.
- 2.2 As such, a Joint Board would focus on those aspects that are of common interest to both councils. This includes ensuring the STP acts to improve the health and wellbeing outcomes across both council areas, and that public monies across the health and social care system are spent in a cost-effective manner. However each Authority's cabinet would still be responsible the budget and commissioning decisions for their area.
- 2.3 It is envisaged that the joint Board would focus on the STP Local Care and Prevention work streams where the local authorities are mission critical given their responsibilities as the relevant social care and public health authorities. It would also take an active role in shaping and developing the proposals for a system wide Strategic Commissioner and the relative roles, responsibilities and accountabilities of the emerging Accountable Care Partnerships for East Kent, and for Medway, West and North Kent that would sit under any Strategic Commissioner.
- 2.4 A joint Board would be time limited to run alongside the STP and would require both authorities to positively endorse any continuation of the arrangement. If agreed it would start from April 1st 2018.

3. Membership of a Joint Board

- 3.1 Health and Wellbeing Boards (HWBs) are hybrid committees and have a core statutory membership (Members and Officers) and as such are exempt from requirements for political proportionality. However there will need to be further discussion in relation to appropriate representation.

- 3.2 Statutory members of the HWB would be required to attend from each area and these are:
- The Leader of the Council and/or their nominee
 - Director of Adult Social Services for the local authority
 - Director of Children's Services for the local authority
 - Director of Public Health for the local authority
 - A representative of the Local Healthwatch organisation
 - A representative of each clinical commissioning group (although guidance states that to reduce the burden two or more CCGs may be represented by the same person).
- 3.3 A general power of the local authority exists to appoint other persons as appropriate but given the inherent statutory membership required this would create an unwieldy mechanism for dealing with the fast paced, highly strategic, county wide requirements of the STP.
- 3.4 This means that representation from District Councils and other strategic partners need to be subject to further discussion. It is proposed that District representation mirrors emerging ACP structures and that therefore there are 2 District representatives, chosen as currently through the Kent Leaders Forum.
- 3.5 It is proposed that any Terms of reference are future-proofed to include representation from the Strategic Commissioner function and a representative from each ACP as Health structures develop into new models of care and governance and delivery structures change accordingly.

4. What would happen to existing Health and Wellbeing Boards

- 4.1 This would be a matter for each individual HWB to determine. There are statutory requirements which would be expedited through both Authorities maintaining their own Board. For example the Health and Wellbeing Strategy, the Joint Strategic Needs Assessment and Pharmaceutical Needs Assessment are unlikely to become joint responsibilities under this time limited proposal.
- 4.2 However in order to reduce meeting overload it is likely that the Kent Board would be put into abeyance, perhaps meeting once a year to discharge its role and agree any statutory business that could not be undertaken by the joint Board.

5. Legal implications

- 5.1 Section 198 of the Health and Social Care Act 2012 provides that two or more Health and Wellbeing Boards may make arrangements for any of their functions to be exercisable jointly. As mentioned above, the establishment of and the arrangement for the joint committee would require the approval of both local authorities. There is a precedent for a joint Board across two upper

tier authorities, with Bournemouth BC and Poole BC operating a joint board which sits across a joint strategic function.

6. Recommendations:

6.1 The Board is asked to:

- a) Agree to recommend to County Council the creation of a joint Board with Medway Council dependent on agreement from Medway Council, and further discussions with STP Leadership;
- b) Agree that the joint Board should focus on the Kent and Medway STP;
- c) Agree that membership may include future representation from the strategic commissioner function and ACPs as new structures develop;
- d) Delegate to the Chairman responsibility for agreeing Terms of Reference for the joint Board with Medway Council and STP Leadership.

REPORT AUTHOR:

Karen Cook
Policy and Relationships Adviser (Health)
Email: Karen.cook@kent.gov.uk
Tel: 03000 415281