



To: Health and Well-being Board

From: Ruth Tennant, Deputy Director of Public Health

Date: 24th June 2013

Subject: New governance and delivery arrangements for the Health and Well-being Board

1 Purpose of the Note

- 1.1 To update the Health and Wellbeing Board on changes to membership and to outline new delivery arrangements for the Board's work.

2 Recommendations

- 2.1 To note changes to membership and to endorse new delivery arrangements.
- 2.2 To agree to review membership and delivery arrangements in a year's time to ensure that they continue to be fit for purpose.
- 2.3 To agree voting arrangements for Board.

3 Background

- 3.1 From the 1st April 2013, the Health and Well-being Board has been a statutory committee of the Council. Discussions have been held at full Board meetings and during informal development sessions about how the Board should operate once it becomes a statutory committee. At the Council's AGM on the 16/5/2013, new membership of the Health and Well-being Board was agreed, based on these discussions.
- 3.2 Statutory Board members also took part in a Development Day on the 20th March. This was the last of series of sessions held during the Board's Shadow year to discuss the role and purpose of the board and enable partners to develop a common understanding of what the board should aim to achieve.

4 Membership & meeting frequency

The table below sets out membership for the Board for the 2013/14 municipal year, as agreed at the Council's Annual Meeting. This is consistent with statutory requirements, as set out in the 2012 Act.

Position / Organisation	Representation
Leader of the Council	

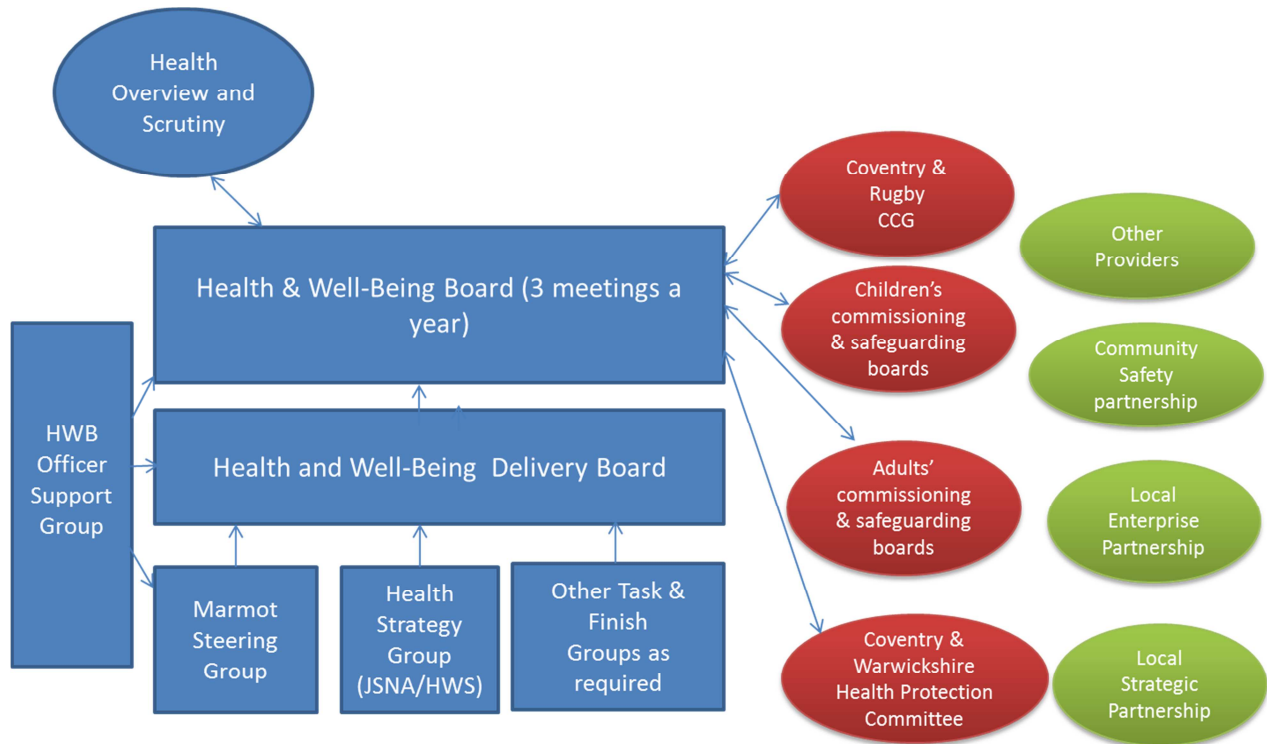
Cabinet Member – Health and Social Care	
Cabinet Member - Children and Young People	
Opposition Councillor representative	
Additional elected member, as determined by the Leader	Chair of Scrutiny Board 5
Director of Community Services	
Director of Children, Learning and Young People	
Director of Public Health	
Local Healthwatch	2 representatives
Coventry and Rugby Clinical Commissioning Group	2 representatives
Voluntary Action Coventry	1 representative
Coventry University	Vice-Chancellor (or rep)
Warwick University	Vice-Chancellor (or rep)
NHS Commissioning Board	1 representative
West Midlands Police	1 representative
West Midlands Fire Service	Operations Commander Coventry

Other organisations, including NHS providers (University Hospitals Coventry and Warwickshire, George Eliot Hospital Trust, Coventry and Warwickshire Partnership Trust) will be invited to meetings as required.

The Board will meet three times a year.

5. Delivery structure & relationship to other boards

The wide remit of the Health and Well-being Board means that it will need to maintain good working relations with a range of other key stakeholder boards. It will also need to be supported by a strong delivery structure to make sure that work is delivered on behalf of the board by all the agencies that contribute to health and well-being in the city. This is set out below:



5.1 Health and Well-being Delivery Board

To oversee delivery of the Health and Well-being Board's programme and for development sessions on specific topics a new Delivery Board is proposed. This would consist of:

- Leader
- Cabinet Member – Community Services
- Cabinet Member – CLYP
- Director of Community Services
- Director of Children's Services
- Director of Public Health
- HealthWatch – 2 representatives
- Coventry and Rugby Clinical Commissioning Group – 2 representatives
- NHS Commissioning Board

This would meet as required and would allow for detailed discussions on areas of mutual interest to be determined by the Health and Well-being Board.

5.2 Health and Well-being Officer Support Group

An officer group has been put in place, which includes Public Health, Community Services, CLYP, Community Safety and Coventry and Rugby Clinical Commissioning Group. The aim of this group is to provide cross-agency support for the Health and Well-being Board and Delivery Group and to oversee delivery of key areas of work in between board meetings.

5.3 Health and Well-being Task and Finish Groups

Specific areas of work will be carried out on behalf of the Health and Well-being Board through dedicated task and finish or steering groups. This includes the Marmot steering group which includes representation from all directorates of the council and partners and is charged with delivering the Marmot City work programme and a group to oversee the development of the statutory Health and Well-being Strategy and Joint Strategic Needs Assessment. Other task and finish groups will be established as required as the work programme of the Health and Well-being Board Develops.

5.4 Ensuring new structures are fit for purpose

It is recognised that the Health and Well-being Board (and some of its key partner organisations) are new organisations and that these structures are likely to need to change over time. It is therefore proposed that these structures are reviewed after a year to ensure that they are fit for purpose.

5.5 Relationship with other key partnerships

The over-arching nature of the Health and Well-being Board means that it will need to work closely with other key partnerships, including the Children's and Adult's Joint Commissioning Boards, Safeguarding Boards and Community Safety Partnership. It is proposed that the work programme of the Health and Well-being Board reflects this relationship and that these boards are invited to present their work programmes to the Health and Well-being Board annually. It is also proposed that the Board has oversight of the Coventry and Warwickshire Health Protection Committee and reviews key areas of work, such as significant strategies on a regular basis. Relationships with other boards that have the potential to influence health and well-being, including the Local Enterprise Partnership and Local Strategic Partnership are also likely to need to be developed as the Board develops.

5.6 Relationship with Health Overview and Scrutiny Committee

Board development sessions have noted the need to establish good work relationships between the Health and Well-being Board and Health Overview and Scrutiny Committee (HOSC). This will be facilitated by representation on the Health and Well-being Board by the Chair of HOSC.

6. Voting rights

All elected members of a council committee have the right to vote on matters before it. The 2013 Regulations provide that all members of the Board, whether co-opted or elected members have voting rights unless the Council directs otherwise. This means that unless a direction is given, Council employees who are statutory members of the Board, and representatives of outside organisations have voting rights as well as elected members, both on the Board itself and on any sub-committees or joint sub-committees. The Council may only make a direction if it has first consulted with the Board.

Members of the Board will be subject to the Standards provisions of the Localism Act 2011 if they have voting rights. This means that they will have to comply with the requirement to register, declare and have published their disclosable pecuniary interests.