

**PROPOSED CHANGES TO MEMBERSHIP AND STANDING ORDERS OF THE  
CAMBRIDGESHIRE HEALTH AND WELLBEING BOARD**

*To:* Council

*Date:* 10th May 2016

*From:* LGSS Director Law, Procurement and Governance

*Purpose:* To consider the recommendation of the Health and Wellbeing Board, in consultation with the Constitution and Ethics Committee, to make changes to the membership and standing orders of the Cambridgeshire Health and Wellbeing Board.

*Recommendation:* It is recommended that Full Council:

- a) approve the expansion of the membership of the Health and Wellbeing Board by the addition of
  - i. a third representative of Cambridgeshire and Peterborough Clinical Commissioning Group
  - ii. a representative from each of the five local NHS providersas set out in report appendix A
- b) approve the amendment of the Board's standing orders to
  - i. specify that the Vice-Chairman/woman will be drawn from the Clinical Commissioning Group representatives on the Board
  - ii. remove the requirement that the quorum must include the Chairman/woman or Vice-Chairman/woman
  - iii. permit the nomination of a Chairman/woman for a meeting at which neither Chairman/woman nor Vice-Chairman/woman is present
  - iv. increase the size of the quorum from five to eight membersas set out in report appendix B
- c) authorise the Monitoring Officer, in consultation with the Chairwoman of the Constitution and Ethics Committee, to make any other minor or consequential amendments to the Constitution necessary for, or incidental to, the implementation of these proposals

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## **1. BACKGROUND**

- 1.1 The Department of Health describes the ambition behind the introduction of health and wellbeing boards as being to build strong and effective partnerships, which improve the commissioning and delivery of services across NHS and local government, leading in turn to improved health and wellbeing for local people.
- 1.2 The local authority also has a statutory duty to scrutinise NHS services – this is not a health and wellbeing board function, and in Cambridgeshire sits with the Health Committee.
- 1.3 A development session for members of the Cambridgeshire Health and Wellbeing Board (HWB) was held on 29 October 2015. The development session was based around the Local Government Association (LGA) report, 'Making it better together: A call to action on the future of health and wellbeing boards', which provided national research into health and wellbeing board effectiveness and examples of best practice.
- 1.4 A report outlining the main topics of discussion at this development session was presented to the HWB on 19 November 2015. At the meeting, it was agreed to establish a time-limited working group to further develop some of the main ideas raised at the development session. A small number of HWB members volunteered to join this working group, hereafter referred to as the 'HWB Working Group'.
- 1.5 The HWB Working Group met for the first time on 25 January 2016 and discussed what were considered to be the key points raised at the HWB's development session in October 2015.
- 1.6 A summary of these discussions was circulated to the wider membership of the Cambridgeshire HWB for initial comments, feedback and direction. As a consequence, the HWB Working Group met for a second time on 22 February 2016 to further refine its thinking based on this feedback.
- 1.7 One of the key proposals developed by the HWB Working Group was to refine the Cambridgeshire Health and Wellbeing Board's membership to ensure the board reflects a more balanced partnership between local authorities and NHS representation, to support its core purpose of strong and effective partnership working.
- 1.8 This draft proposal to change the HWB's membership, along with other draft proposals developed by the HWB Working Group, was discussed again with the Cambridgeshire Health and Wellbeing Board at its meeting on 17 March 2016. The HWB agreed to four of the five draft proposals. The proposals agreed were:
  - Invite 5 representatives for NHS providers to join the Health and Wellbeing Board (a mix of non-executive directors and executives)
  - Have a co-chair or vice-chair arrangement with the clinical commissioning group (CCG)
  - Hold board-to-board meetings with Peterborough's HWB, exploring joint programmes of work
  - Strengthen links with Local Health Partnerships, exploring joint working with Integrated Care Boards

- 1.9 The proposal not agreed by the HWB related to reducing the number of elected Members on the HWB (both County and District Members). The HWB tasked the HWB Working Group with further refining this proposal before it be brought back to the HWB for consideration at a future meeting.
- 1.10 Comment and feedback on all of these proposals was also sought from the Cambridgeshire Public Services Board at its meeting of 13 April 2016.
- 1.11 As the HWB is a Council Committee, any proposed changes to its membership must be considered by the Constitution and Ethics Committee and approved by Full Council.
- 1.12 Draft proposals to change the membership of the HWB were discussed by the Constitution and Ethics Committee on 19 April 2016. The below recommendations were agreed by the committee:
  - a) to note the current draft proposals to make changes to the membership of the Cambridgeshire Health and Wellbeing Board (HWB)
  - b) to delegate authority to the Monitoring Officer, in consultation with the Chairwoman and Vice-Chairman of the Constitution and Ethics Committee and Chairman and Vice-Chairman of the Cambridgeshire Health and Wellbeing Board (HWB), to recommend the final proposed changes to the membership of the Cambridgeshire HWB to full Council on 10th May 2016.
- 1.13 Subsequently, the HWB was presented with final options for refining its membership at a special meeting of the board on 21 April 2016. All options included the invitation of five NHS provider representatives, which had already been agreed. The final options presented were as follows:
- 1.14 ***Option 1: existing Councillor membership to remain***  
*There is potential to invite a further CCG 'Officer' representative, bringing total 'NHS' representation up to nine. However, no changes would be made to Councillor membership of the HWB, meaning this would remain at five County Councillors and five District Councillors.*  
  
*This would see the HWB increase in size and though not an equal balance in terms of numbers, it would ensure more of a balanced partnership between local authorities and health than the current membership. The total membership of the HWB would rise to twenty-four under this option, with thirteen 'local authority' representatives, nine 'NHS' representatives, one Healthwatch and one co-opted VCS representative.*
- 1.15 ***Option 2: reduce to 4 County Councillors and 1 District Councillor***  
*The HWB would reduce Councillor membership to five and leave CCG membership at two. This option proposes four County Councillors and a single District Councillor representative.*  
  
*This would achieve a more balanced partnership between local authorities and health. It would be important to ensure a single District Councillor representative is able to truly represent the views and needs of each District at the Board, and there are issues about whether this would be feasible or acceptable. Option 2 would bring the total membership of the HWB to eighteen (with eight 'local authority'*

representatives, eight 'NHS' representatives, one Healthwatch and one co-opted VCS representative).

**1.16 Option 3: reduce membership to 3 County Councillors, but remain with 5 District Councillors**

*The HWB would reduce Councillor membership to eight, with three County Councillors and five District Councillors. The three County Councillor members could potentially be drawn from Chairs or Vice-Chairs of the three County Council Committees responsible for social care and public health i.e. Adults Committee, Children and Young People Committee and Health Committee.*

*The main drawback of this option is that the County Council, which has statutory responsibility for the Health and Wellbeing Board and associated functions of social care and public health, would have a lower level of democratic representation than District Councils. Under this option the total membership of the HWB would be twenty-two including three CCG representatives, twenty-one if CCG representation remained at two (with eleven 'local authority' representatives, eight or nine 'NHS' representatives, one Healthwatch and one co-opted VCS representative).*

## **2.0 PROPOSED CHANGES TO THE CONSTITUTION**

- 2.1 After careful consideration and discussion of the options, the HWB agreed at its meeting of 21 April 2016 to recommend Option 1 to Full Council, as set out at paragraph 1.14 of this paper. The HWB also reiterated its support for the other four proposals previously agreed at its meeting of 17 March 2016, as listed at paragraph 1.8 of this paper. The view was expressed that it would be helpful if Councillors nominated to the Board could include County members with links to the Adults, the Children and Young People, and the Health Policy and Service Committees, and District members with links to the Local Health Partnerships.
- 2.2 In addition to these options, the HWB also considered a tabled proposal to amend the HWB's standing orders, to reflect the proposed increase in size of the board. After discussion, the HWB agreed to recommend to Council the following changes be made:
- amend the HWB's quorum to a minimum of eight members in attendance;
  - amend the HWB's standing orders to allow the nomination of a temporary Chair, in the absence of both the Chair and Vice-Chair.
- 2.3 The relevant amended sections of the Constitution are attached to this paper as Appendix A (Terms of Reference) and Appendix B (Standing Orders). Deleted text is shown struck through and new text underlined.

Source Documents	Location
HWB membership paper to 17 March 2016 Cambridgeshire Health and Wellbeing Board	<a href="http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/AgendaItem.aspx?agendaItemID=13061">http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/AgendaItem.aspx?agendaItemID=13061</a>
Minutes of 17 March Cambridgeshire HWB meeting	<a href="http://www2.cambridgeshire.gov.uk/CommitteeMinutes/committee-document.aspx/committees/cambs-health-wellbeing-board/2016-03-17/Minutes/10923/160317%20minutes.doc">http://www2.cambridgeshire.gov.uk/CommitteeMinutes/committee-document.aspx/committees/cambs-health-wellbeing-board/2016-03-17/Minutes/10923/160317%20minutes.doc</a>
Agenda and minutes of 19 April 2016 Constitution and Ethics Committee meeting	<a href="http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/Meeting.aspx?meetingID=1181">http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/Meeting.aspx?meetingID=1181</a>
Agenda and minutes of 21 April 2016 meeting of the Cambridgeshire Health and Wellbeing Board	<a href="http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/Meeting.aspx?meetingID=1182">http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/Meeting.aspx?meetingID=1182</a>

