

4 May 2022**Agenda Item: 6****REPORT OF THE CHAIR OF THE HEALTH AND WELLBEING BOARD****MEMBERSHIP TO THE HEALTH AND WELLBEING BOARD****Purpose of the Report**

1. To consult the Health and Wellbeing Board and seek approval on the addition of Bassetlaw, Mid-Nottinghamshire and South Nottinghamshire Place Based Partnerships to its membership.
2. To inform members on the addition of the Nottinghamshire Integrated Care Board to its membership, as part of the statutory requirements of the Health and Care Bill posed to take affect from 1 July 2022.

Information**Statutory Context**

3. Health & Wellbeing Boards were established under the [Health and Social Care Act 2012](#) with compulsory membership of the Health and Wellbeing Board to include:
 - a) at least one councillor of the local authority,
 - b) the director of adult social services for the local authority,
 - c) the director of children's services for the local authority,
 - d) the director of public health for the local authority,
 - e) a representative of the Local Healthwatch organisation for the area of the local authority,
 - f) a representative of each relevant clinical commissioning group¹, and
 - g) Such other persons, or representatives of such other persons, as the local authority thinks appropriate.
4. Please see **Appendix 1** for the list of current members to the Nottinghamshire Health and Wellbeing Board.
5. **Appendix 2** provides a brief summary of the membership of other local Health and Wellbeing Boards in the East Midlands for further context.

¹ From 1 July 2022, Membership of Clinical Commissioning to the Health and Wellbeing Boards will be replaced by the Integrated Care Board as part of the proposals of the [Health and Care Bill](#) (amendments 183 & 184 to the Health and Social Care Act, p.186)

Implications of the Health and Care Bill (July 2022)

6. The new Health and Care Bill that was due to come into effect in April 2022, and will now do so on 1 July 2022, proposes a number of changes to local health systems including the establishment of Integrated Care Systems across England that will include an Integrated Care Board and Integrated Care Partnership (Please see **Appendix 3**).
7. A report detailing the implications and changes proposed to the local system will be presented to the Health and Wellbeing Board at its meeting on 15 June, upon the Bill receiving royal assent and before the changes come into effect.
8. In reference to the implications to the membership of the Health and Wellbeing Board, the Health and Social Care Bill amends that representation of the clinical commissioning groups at the Health and Wellbeing Board is to be replaced by the Integrated Care Board. Current Clinical Group representation is listed below:
 - Dr Jeremy Griffiths (NHS Nottingham & Nottinghamshire Clinical Commissioning Group)
 - Idris Griffiths (NHS Bassetlaw Clinical Commissioning Group)
 - Dr Thilan Bartholomeuz (NHS Nottingham & Nottinghamshire Clinical Commissioning Group)
 - David Ainsworth (NHS Nottingham & Nottinghamshire Clinical Commissioning Group)
 - Lucy Dadge (NHS Nottingham & Nottinghamshire Clinical Commissioning Group)
 - Fiona Callaghan (NHS Nottingham & Nottinghamshire Clinical Commissioning Group)
9. From July 2022, there will be a statutory requirement for at least one representative of the Integrated Care Board for Nottinghamshire as a member of the Health and Wellbeing Board.

Addition of Place Based Partnerships (Mid Notts, South Notts, Bassetlaw)

10. As part of the local health and care system, Place Based Partnerships (PBP) are also being established, with 4 PBPs covering Nottinghamshire including Bassetlaw, Mid-Nottinghamshire, Nottingham City and South Nottinghamshire. These Place Based Partnerships have been working in shadow form, awaiting formal ratification in July 2022.
11. This report outlines proposals to include 3 Place Based Partnerships that relate to the County boundary to become members of the Board, to support better integration of services and integrated working as part of the Board's statutory duties. Following the development the new Joint Health and Wellbeing Strategy for 2022 – 2026 and workshop held on 23 March 2022, the importance of place based working has been highlighted as vital for the effective delivery of the new strategy over the next four years.
12. Place Based Partnerships bring together statutory and voluntary organisations to serve a local population, and deliver community facing joined up services and care. Place Based Partnerships work across sectors to tackle health inequalities by improving access and adopting a population health approach incorporating consideration of the wider determinants of health. This includes consideration of those factors that impact on overall health and wellbeing such as education, employment, lifestyle choices and housing.
13. Place Based Partnerships have an important contribution to improving outcomes and supporting communities to become healthier through building on community assets and

ownership of their health and social needs, and coordinating the health and care sector’s contribution to social and economic development. Place Based Partnerships will define and deliver locally determined objectives and priorities and as agreed at the workshop held in March 2022, will work closely with the Health and Wellbeing Board. The Partnerships’ delivery plans will take account of the Nottinghamshire’s Joint Strategic Needs Assessment and the Joint Health and Wellbeing Strategy for 2022 – 2026.

14. It is proposed that the membership of Bassetlaw, Mid Nottinghamshire and South Nottinghamshire Place Based Partnerships are added to the Board - The suggested representatives of Place Based Partnerships and proposed board members are listed below.

Bassetlaw Place Based Partnership	
Dr Eric Kelly	Clinical Lead
Lee Eddell	Programme Director
Mid Nottinghamshire Place Based Partnership	
Dr Thilan Bartholomeuz (existing member)	Clinical Lead
Lorraine Palmer	Programme Director
South Nottinghamshire Place Based Partnership	
Dr Nicole Atkinson	Clinical Lead
Helen Smith	Programme Director

15. Preliminary engagements have taken place with these organisations to discuss how PBPs and the Board can best work together and align delivery structures.
16. The inclusion of a Clinical Lead and Programme Director for each Place Based Partnership is proposed to strengthen leadership by the Board and promote of integrated working across agendas and priorities from both a clinical and strategic perspective.

Next Steps

17. The Integrated Care System and associated structures will not become official statutory bodies until July 2022; however these structures have been developed since the Bill was presented in July 2021 and Place Based Partnerships are now operating in shadow form in anticipation of the Health and Care Bill becoming enacted in July 2022.
18. If the recommendations of this report are supported and passed by the Health and Wellbeing board, Place Based Partnership for Bassetlaw, Mid Nottinghamshire and South Nottinghamshire will be invited to become members of the Board. The ICB representative(s) will become an automatic member upon the legislation coming into effect in July 2022 and does not require any consultation with the Health and Wellbeing Board prior to this.
19. The Board’s meeting in May provides an opportunity to have a discussion on any considerations for the membership to the Board in the future, as part of the ongoing development of the delivery structures required for the new Joint Health and Wellbeing Strategy.

Other Options Considered

20. There is the option to not include Place Based Partnerships on the Health and Wellbeing Board. However, this is deemed not advisable as the addition of Place Based Partnerships will improve the Health and Wellbeing Boards delivery of its statutory functions to improve health and wellbeing of residents in Nottinghamshire.

Reason/s for Recommendation/s

21. The addition of Place Based Partnerships to the Nottinghamshire Health and Wellbeing Board will support the delivery of its statutory duties to promote integrated working and improve the health and wellbeing of residents of Nottinghamshire.

Statutory and Policy Implications

22. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

23. There are no direct financial implications arising from this report.

RECOMMENDATION/S

The Health and Wellbeing Board is asked:

- 1) To approve the addition to the membership of the Health and Wellbeing Board of Bassetlaw Place Based Partnership, Mid Nottinghamshire Place Based Partnership and South Nottinghamshire Place Based Partnership.
- 2) To identify any further actions required in relation to the membership of the Health and Wellbeing Board.

Councillor Dr John Doddy
Chair of Nottinghamshire Health and Wellbeing Board

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Constitutional Comments (LPW 20/04/22)

24. The recommendations fall within the remit of the Nottinghamshire Health and Wellbeing Board by virtue of its terms of reference.

Financial Comments (DG 19/04/22)

25. There are no direct financial implications arising from this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- None

Electoral Division(s) and Member(s) Affected

- All

