



Westminster Health
& Wellbeing Board



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Title: Proposed MOU for a joint K&C and Westminster Health and Wellbeing Board

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1. Executive Summary

- 1.1 At the concurrent meeting of the K&C and Westminster Health & Wellbeing Boards in November 2018, the Board discussed creating a joint K&C and Westminster Health and Wellbeing Board.
- 1.2 The sovereign Health and Wellbeing Boards (HWBB) for Kensington & Chelsea (K&C) and Westminster each meet separately six times per year. The Boards are held by the local authorities and the local Clinical Commissioning Groups (CCGs), bringing together stakeholders from across local government, the NHS, and the voluntary and community sector. The aim is to plan strategically to improve the health and wellbeing of residents in K&C and Westminster.
- 1.3 The Boards regularly discuss the same issues and there is significant crossover in Board Membership (see Appendix A). It is proposed that a joint K&C and Westminster HWBB is established to avoid duplication of work. The sovereign HWBBs will continue and will hold any discussions of relevance only to their borough.
- 1.4 This proposed Memorandum of Understanding (MOU) sets out the agreed processes for the joint Board.

2. Key Matters for the Board

- 2.1 That the Westminster and RBKC Boards consider proposals to establish a joint Westminster and RBKC HWBB.

3. Recommendations

- 3.1 That the Westminster Board approves the proposals to establish a joint HWBB with the Royal Borough Kensington and Chelsea.
- 3.2 That the Westminster Board approves the draft constitution of the proposed Joint HWBB (including the membership), as set out in Appendix C.
- 3.3 That the Westminster Board approves the draft meeting schedule, as set out at Appendix D.
- 3.4 That the Kensington and Chelsea Board approves the proposals to establish a joint HWBB with the Westminster Board.
- 3.5 That the RBKC Board approves the draft constitution of the proposed joint HWBB (including the membership), as set out in Appendix C.
- 3.6 That the RBKC Board approves the draft meeting schedule, as set out at Appendix D.

4. Proposal

- 4.1 It is proposed that there are six HWBB board meetings per year for each borough. This will be split into four joint K&C and Westminster HWBB meetings and two meetings of each sovereign-borough HWBB. In this new structure, it is suggested that
- the joint K&C and Westminster HWBB meetings focus on health and wellbeing matters relating to both boroughs
 - one of the sovereign HWBB meetings includes a review of the Boards' progress
 - once per year, a joint K&C and Westminster HWBB meeting includes a dedicated workshop to develop and agree joint priorities and ways of working for the year ahead
 - The sovereign HWBBs may decide to hold a concurrent meeting with the other HWBB, instead of holding a separate, sovereign-borough HWBB meeting
- 4.2 The joint K&C and Westminster HWBB members will ensure the following founding principles of the Health and Wellbeing Boards will be continued across both boroughs
- shared leadership of a strategic approach to the health and wellbeing of communities that reaches across all relevant organisations
 - commitment to driving real action and change to improve services and outcomes
 - openness and transparency in the way that the board carries out its work
 - inclusiveness in the way it engages with patients, service users and the public.

- 4.3 The Royal Borough of Kensington & Chelsea's (RBKC) Lead Member for Healthy City Living and the Westminster City Council (WCC) Cabinet Member for Family Services and Public Health are the respective chairs of their borough's Health and Wellbeing Boards. They will alternately chair the joint HWBB meetings. If neither the WCC Cabinet Member nor the RBKC Lead Member is able to chair the meeting, the Vice-Chairs of the joint Board will do so instead. The Vice-Chairs of the Board will be the Chairs of Central and West London CCGs.
- 4.4 The local authority elected members and Chairs of the CCGs will work closely together to ensure the integrated management of the joint-borough and sovereign-borough HWBBs.
- 4.5 The HWBB will bring together Board Members for strategic health and wellbeing planning. This includes encouraging integrated working between health and social care partners, being accountable for the delivery of the Health and Wellbeing Strategies' Priorities and the K&C and Westminster HWBBs' key issues and producing JSNAs. All board members will have the opportunity to contribute to the board's deliberations, strategies and activities. In addition, all members (with commitment from their nominating organisations) will share ownership of the board and accountability to the communities it serves.
- 4.6 The joint-borough HWBB will only discuss issues relevant to both boroughs. If a sovereign-board issue arises that needs to be discussed at a sovereign-board meeting, the relevant Board will meet directly after the joint HWBB.

5. HWBB priorities

- 5.1 For 2018/19, K&C and Westminster's HWBBs have agreed to focus their work on the following key issues, in line with each borough's local needs:
- Sugar, including in Early Years
 - Loneliness
 - Dementia
- 5.2 The K&C and Westminster Boards will agree joint priorities for the following 12 months when they meet in May 2019.

6. Venue

- 6.1 The Chair, in collaboration with the co- and vice-chairs, will decide where the Board meeting will take place, with the aim being to encourage public attendance at the Board. If no community venue is organised, the Board will alternately meet in RBKC Town Hall and WCC City Hall.

7. Membership

- 7.1 The joint K&C and Westminster Board Membership will be reviewed periodically with partners to ensure it is fit-for-purpose (see board members at Appendix B).

7.2 In terms of roles and responsibilities, members are expected to work together to deliver the statutory functions of the Board in the interests of K&C and Westminster residents. The statutory functions are:

- To prepare Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs), which is a duty of local authorities and clinical commissioning groups (CCGs).
- A duty to encourage integrated working between health and social care commissioners, including providing advice, assistance or other support to encourage arrangements under s75 of the NHS Act 2006 (i.e. lead commissioning, pooled budgets and/or integrated provision) in connection with the provision of health and social care services.
- A power to encourage close working between commissioners of health-related services and the board itself.
- A power to encourage close working between commissioners of health-related services (such as housing and many other local government services) and commissioners of health and social care services.

8. Governance

8.1 To support integrated management of the Board, representatives from RBKC, WCC and CL and WL CCGs will meet six weeks before each meeting to plan the agenda. This will ensure both boroughs and both CCGs have oversight of papers being presented to the joint Board.

8.2 The Chair will approve the final meeting agenda of the Health and Wellbeing Board agenda in consultation with the co-chair, and the vice-chairs.

8.3 Subject to these proposals being approved, WCC's Committee Services and RBKC's Governance Services will consider the appropriate clerking arrangements. The Board papers will be circulated one week ahead of the Board meeting once they have been collated and also published on each website.

9. Legal Implications

9.1 The joint Board must remain compliant with the statutory obligations of Health and Wellbeing Boards.

9.2 The Health and Social Care Act 2012 permits that two or more Health and Wellbeing Boards may make arrangements for –

- (a) any of their functions to be exercisable jointly;
- (b) any of their functions to be exercisable by a joint sub-committee of the Boards;
- (c) a joint sub-committee of the Boards to advise them on any matter related to the exercise of their functions

9.3 The Health and Social Care Act 2012 gives health and wellbeing boards specific functions. These are a statutory minimum and further functions can be given to the boards in line with local circumstances. The statutory functions are:

- To prepare Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs), a duty of local authorities and Clinical Commissioning Groups (CCGs).
 - A duty to encourage integrated working between health and social care commissioners, including providing advice, assistance or other support to encourage arrangements under section 75 of the National Health Service Act 2006 (i.e. lead commissioning, pooled budgets and/or integrated provision) in connection with the provision of health and social care services.
 - A power to encourage close working between commissioners of health-related services and the board itself.
 - A power to encourage close working between commissioners of health-related services (such as housing and many other local government services) and commissioners of health and social care services.
 - Any other functions that may be delegated by the council under section 196(2) of the Health and Social Care Act 2012. For example, this could include certain public health functions. Such delegated functions need not be confined to public health and social care. Where appropriate, they could also, for example, include housing, planning, work on deprivation and poverty, leisure and cultural services, all of which have an impact on health, wellbeing and health inequalities.
- 9.4 Each borough will maintain sovereign Health and Wellbeing Strategies, which will be discussed during their sovereign meetings, as necessary.
- 9.5 Most JSNAs are produced across K&C and Westminster. They can therefore be included on the agenda of the joint Board. If a sovereign JSNA is required, it will either be discussed during the sovereign meetings, reviewed offline or, if necessary, included on the agenda of the joint Board.
- 9.6 All other statutory functions will be addressed through the sovereign and joint Boards, as relevant.

10. Next Steps

- 10.1 Subject to the K&C and Westminster Boards' approval, the first meeting of the joint HWBB will take place on 9 May 2019. A programme of meetings for both joint and sovereign Health and Wellbeing Boards can be found at Appendix D.

APPENDICES:

Appendix A: Overview of previous Board Agendas

Appendix B: Table Outlining Board Membership

Appendix C: Draft Constitution of the Joint K&C and Westminster Health and Wellbeing Board

Appendix D: Programme of meetings for joint and sovereign Health and Wellbeing Board

Appendix A: Overview of previous Board Agendas

A breakdown of the K&C and Westminster Board agendas from January-July 2018 are detailed below

- There were 12 distinct agenda items across both the K&C and Westminster Boards in this time period
- Of this number, 8 items were brought to both boards; K&C had 1 sovereign item and Westminster had 3 sovereign items
- As such, **two-thirds of agenda items were shared across both boards** (67%), and one third were sovereign (33% total - 8% sovereign K&C and 25% sovereign Westminster)

As both boards have agreed the key issues of sugar in early years, dementia and loneliness, there will be increased crossover in agenda items.

Shared K&C and Westminster HWBB Agenda Items January-July 2018

Shared Item	Date at RBKC HWBB	Date at WCC HWBB
Integrated Care Outcomes Framework/Whole Systems Integrated Care Dashboard Presentation/ North West London Sustainability and Transformation Plan/ Transforming Primary Care in West London	10 January	18 January
BCF Programme 2017-19: Progress Monitoring Report	14 March	20 March
Suicide Prevention Action Plan 2018-2021	14 March	20 March (NB Suicide Prevention Refresh - 18 January)
Pharmaceutical Needs Assessment 2018-21	14 March	20 March
SEND JSNA, Strategy and Commissioning Plans	11 July	Local Area SEND Brief – 20 March JSNA – 24 May Strategy - 12 July
DPH Annual Report	11 July	12 July
Decision on the Selection of Three Key Topics for the Board/Health and Wellbeing Board Workshop Session Notes, 14 March 2018	11 July	12 July
“Big Plan” LD Joint Commissioning Strategy	11 July	13 September (offline review)
Westminster Planning for Integrated Care and the MCP/ Progress Delivering the West London CCG Integrated Care Strategy	12 September	13 September

Overview of K&C and Westminster HWBB Agendas January-July 2018

RBKC		Westminster	
<u>10 Jan 2018</u>	<ul style="list-style-type: none"> • North West London Sustainability and Transformation Plan • Transforming Primary Care in West London • Improving Mental Health Services for Young People • JSNA Work Programme Update 	<u>18 Jan 2018</u>	<ul style="list-style-type: none"> • 2017-18 Progress Update on the Health and Wellbeing Strategy, incl. discussion on the London Health Devolution MOU • Integrated Care Outcomes Framework • Whole Systems Integrated Care Dashboard Presentation • Verbal Update on the work of the Safer Westminster Partnership • Suicide Prevention Strategy Refresh
<u>14 March 2018</u>	<ul style="list-style-type: none"> • Pharmaceutical Needs Assessment • Better Care Fund Programme 2017-19 – Progress Monitoring Report • Suicide Prevention Action Plan 2018-2021 	<u>20 March 2018</u>	<ul style="list-style-type: none"> • Chairman’s Verbal Update • Local Area SEND Brief • BCF Programme 2017-19 – Progress Monitoring Report • Suicide Prevention Action Plan 2018-2021 • Pharmaceutical Needs Assessment 2018-21
		<u>24 May 2018</u>	<ul style="list-style-type: none"> • Patients and their Carers’ Experiences of Living with Long-Term Health Conditions in Westminster • Children & Young People with SEND JSNA
<u>11 July 2018</u>	<ul style="list-style-type: none"> • Children with Special Educational Needs and Disabilities (SEND) - JSNA, SEND Strategy and Joint Commissioning Plan (SEND) WLCCG Primary Care Network Development • Learning Disabilities Big Plan 2018-2021 • Draft DPH Annual Report • Health and Wellbeing Board Workshop Session Notes, 14 March 2018 	<u>12 July 2018</u>	<ul style="list-style-type: none"> • Decision on the Selection of Three Key Topics for the Board • Homelessness Prevention Health Referrals • Draft DPH Annual Report • Children's SEND Strategy • Children’s Joint Commissioning Plan (SEND)

Appendix B: Table Outlining Board Membership*

Name	Position	Organisation
Cllr Heather Acton (Co-Chair)	Cabinet Member for Families & Public Health	WCC
Cllr David Lindsay (Co-Chair)	Lead Member for Healthy City Living	RBKC
Dr Neville Pursell	Chair of the CL CCG	Central London CCG
Dr Andrew Steeden / Dr Naomi Katz	Chair / Vice Chair of the WL CCG	West London CCG
Cllr Sarah Addenbrooke	Lead Member for Adult Social Care	RBKC
Cllr Nafsika Butler-Thalassis	Minority Group representative	WCC
Cllr Emma Will	Lead Member for Families, Children and Schools	RBKC
Jules Martin	Managing Director	Central London CCG
Louise Proctor	Managing Director	West London CCG
Olivia Clymer	CEO	Healthwatch Central West London
Bernie Flaherty	Bi-borough Executive Director of Adult Social Care	WCC/RBKC
Senel Arkut	Bi-borough Director of Health Partnerships	WCC/RBKC
Melissa Caslake	Bi-borough Executive Director of Children's Services	WCC/RBKC
Andrew Howe	Bi-borough Director of Public Health	WCC/RBKC
Dr David Finch	NHS England NW London representative	NHS England
Jennifer Travassos	Housing representative	WCC
Dr Basirat Sadiq	Divisional Director of Operation	Central London Community Healthcare NHS Trust
Clare Robinson	AD of Service Development & Commissioner Relations	Imperial College Healthcare NHS Trust
Maria O'Brien/ Robyn Doran	Managing Director/COO	Central and North West London NHS Trust
Lesley Watts	CEX	Chelsea and Westminster Hospital NHS Foundation Trust
Angela Spence	CEX	K&C Social Council
Hilary Nightingale	Chair of Westminster Community Network	Westminster Community Network
Iain Cassidy	CEO	Open Age
Spencer Sutcliffe and Paul Kavanagh	BC for RBKC and BC for Westminster	London Fire Brigade
DI Iain Keating / DI Seb Adjei-Addoh –	WCC and RBKC Met Board representatives	Metropolitan Police

* Correct at time of writing

Appendix C: Bi-Borough Joint Health and Wellbeing Board Draft Constitution

1. VISION OF THE BOARD

- 1.1 The K&C and Westminster (the Bi-Borough) Health and Wellbeing Board will provide strong and effective leadership across the local authorities and NHS partners by setting a clear direction, across traditional boundaries, to deliver change and fresh thinking. The Bi-Borough Board will work in partnership to address health issues that cannot be tackled by one organisation alone.
- 1.2 The Board will recognise that one size does not fit all and will ensure that services are designed to reflect the changing needs of the individuals and communities they serve and are easy to access. The Board will be accountable to those they serve through elected members, and will act as a champion for the voice of those who live, work and play in K&C and Westminster.
- 1.3 The broad vision for the Board is that it will
 - Promote integrated health and social care, where all parties agree this makes sense, in order to deliver more effective and efficient local services.
 - Agree strategic key issues for the joint board in line with each borough's sovereign Health and Wellbeing Strategies. The joint board will push progress against these priorities further and faster, ensuring 'silo working' and conflict are removed. Organisational boundaries should not be a hindrance to developing effective solutions.
 - Demonstrate clear leadership, championing the work and aims of the Board, and act as the key link between their own organisation or department and the Board, ensuring consistency and effective communications.
 - Work with regional and national partners, where this is identified as the most appropriate way of tackling issues and addressing need.

2. RESPONSIBILITIES

- 2.1 To provide strategic and organisational leadership in developing the vision for health and wellbeing in K&C and Westminster and mobilising, co-ordinating and ensuring health and social care decisions are based on clear evidence for improving outcomes.
- 2.2 To mobilise, coordinate and share resources from its membership, and from others, to deliver agreed priorities and the Board's key issues.
- 2.3 To oversee the delivery of shared Joint Health and Wellbeing Strategy (JHWS) priorities, ensuring that health and social care, as well as the wider determinants, can better address the need of the local population.
- 2.4 To oversee the production and use of a programme of Joint Strategic Needs Assessments (JSNA) by the local authorities and the Clinical Commissioning Groups, and ensure that the needs of the local population are properly assessed and captured. The JSNA should aim to map assets as well as needs for local areas and become embedded across the commissioning process of all systems. To also oversee the production and maintenance of the Pharmaceutical Needs Assessment (PNA).

- 2.5 To ensure that all commissioners (the local authorities, the CCGs and the National Commissioning Board) meet their legal obligations by having regard to the JSNA and the Health and Wellbeing Strategies when commissioning and developing their commissioning plan.
- 2.6 To put in place sub-groups to the Board, as and when required, to support the delivery of its functions.
- 2.7 To promote and encourage integrated working across the wider determinants of health including alignment between organisation and department plan and strategies.
- 2.8 To ensure effective engagement and involvement – staff, provider, public, patient, service user and community – in the work of the Bi-Borough Board, delivering on WCC’s Leader’s commitment to better engagement with residents and the RBKC Leader’s commitment to making RBKC a listening borough.
- 2.9 To develop an annual workplan, as well as short, medium and long term goals that have measurable outcomes aligned to the NHS, Public Health and Social Care outcomes frameworks. This to ensure that the performance of the Board and others with responsibility to deliver RBKC and WCC’s sovereign Health and Wellbeing Strategy can be measured, and is accountable.
- 2.10 To review progress annually, and to consider other reports identifying health and social care needs, such as the Director of Public Health’s annual report.
- 2.11 To ensure, through Board members, that organisation and department plans and strategies are aligned. Also to have sight of and influence the strategies and key policies of the local NHS, the Councils, the Community and Voluntary sector, and other partner agencies.
- 2.12 To respond to any relevant local, regional or national consultations on major service redesigns for health, care and wellbeing related service provided within the boroughs or that affect the boroughs.
- 2.13 To promote and support opportunities for Bi-Borough commissioning of health, care and wellbeing where this is the most appropriate way of addressing issues.

3. MEMBERSHIP:

- 3.1 Meetings of the Board will be alternately chaired by RBKC’s Lead Member for Healthy City Living and Westminster’s Cabinet Member for Family Services & Public Health.
- 3.2 Per s194 of the Health and Social Care Act (2012), the Health and Wellbeing Board is to consist of—
 - (a) at least one councillor of the local authority
 - (b) the director of adult social care 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 group, and
- (g) such other persons, or representatives of such other persons, as the local authority thinks appropriate.

3.3 After a Health and Wellbeing Board is established, a local authority must consult the Health and Wellbeing Board before appointing another person to be a member of the Board.

Appendix D: Programme of meetings for Joint and sovereign Health and Wellbeing Boards

2018/19 Dates

Joint and sovereign Board meetings in 2018/19 will take place per below

- The K&C sovereign board meeting will be held on 20 March 2019.
- The Westminster sovereign board meeting will be held on 28 March 2019.

2019/20 Dates

Joint and sovereign Board meeting dates in 2019/20 will take place per below

- Joint board meetings will be held on
 - 9 May 2019 (Workshop to develop joint priorities and agree ways of working for 2019/20)
 - 4 July 2019
 - 28 November 2019
 - 6 February 2020
- The sovereign K&C board meetings will be held on
 - 25 September 2019
 - 22 April 2020 (to include a review of progress)
- The sovereign Westminster board meetings will be held on
 - 10 October 2019
 - 2 April 2020 (to include a review of progress)