

## Lancashire County Council

### Cabinet

Thursday, 2nd December, 2021 at 2.00 pm in Committee Room 'C' - The Duke of Lancaster Room, County Hall, Preston

### Supplementary Agenda

We are now able to enclose, for consideration at the next meeting of the Cabinet to be held on Thursday, 2nd December, 2021, the following information which was unavailable when the agenda was despatched

#### Part I (Open to Press and Public)

#### No. Item

#### 4. Questions for Cabinet (Pages 1 - 2)

To answer any verbal questions and supplementary questions from a county councillor, about any matter which relates to any item under Part I on the agenda for this meeting under Standing Order C35(7).

To submit a question to Cabinet, click [here](#).

There will be a maximum of 30 minutes for the questions to be asked and answered.

#### 11. Urgent Business

An item of urgent business may only be considered under this heading where, by reason of special circumstances to be recorded in the Minutes, the Chair of the meeting is of the opinion that the item should be considered at the meeting as a matter of urgency. Wherever possible, the Chief Executive should be given advance warning of any Member's intention to raise a matter under this heading.

#### The Cabinet Member for Health and Wellbeing - County Councillor Michael Green

#### (a) Health and Wellbeing Board Revised Terms of Reference (Pages 3 - 10)

Angie Ridgwell  
Chief Executive and Director of  
Resources

County Hall  
Preston

### Questions submitted under Standing Order C35

Number of questions to be asked by councillors at the meeting:	1
Number of written questions received from councillors:	1
Number of written questions received from members of the public:	0
 Total Number of Questions received for this meeting:	 2

#### Questions to be asked at the meeting

No.	To be asked by:	Agenda Item:	Question:	For answer by (Cabinet Member):
1.	Erica Lewis	Item 5 - Adult Social Care Winter Plan 2021/22	What assurance mechanisms are in place to ensure that care funded by Lancashire County Council is delivered in all settings?	County Councillor Graham Gooch

#### Written Questions to receive a written response

No.	Asked by:	Agenda Item:	Question:	For answer by (Cabinet Member):
1.	Erica Lewis	Item 9 - School Place Provision Strategy 2022 to 2025	The window for the school places strategy of just three years 2022 – 2025 does not seem realistic in terms of bringing new school places on line. Could further explanation be given as to why this time frame is so narrow and what this means for the phrases 'short-term delivery', 'medium-term delivery', and 'long-term delivery'?	County Councillor Jayne Rear



**Report to the Cabinet**

Meeting to be held on Thursday, 2 December 2021

**Report of the Head of Legal and Governance Services****Part I**Electoral Division affected:  
None;**Corporate Priorities:**  
Caring for the vulnerable;**Health and Wellbeing Board Revised Terms of Reference**

(Appendix 'A' refers)

Contact for further information:

Josh Mynott, Tel: (01772) 534580, Democratic and Member Services Manager,  
josh.mynott@lancashire.gov.uk**Brief Summary**

In order to ensure that the Health and Wellbeing Board remains focussed and effective in tackling health inequalities in Lancashire, it is proposed to change the membership of the Health and Wellbeing Board.

**Recommendation**

Cabinet is asked to recommend that Full Council considers the proposed changes to the membership of Health and Wellbeing Board, as set out at Appendix 'A'.

**Detail**

The Health and Wellbeing Board is a statutory committee of the Full Council. Its role is 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.

The Health and Wellbeing Board has certain specific statutory functions, notably the development of a Joint Strategic Needs Analysis and Health and Wellbeing Strategy, and a more general responsibility to develop health and care services across different agencies.

The public health landscape has clearly changed over the last 18 months, and the period of change will continue with structural reforms to the health service. In

response to these challenges, discussions about the future shape of the Health and Wellbeing Board have taken place.

The existing Health and Wellbeing Board has a large membership, reflecting a desire to engage with as many partners as possible, as well as the complex organisational landscape in health and local government in Lancashire. This approach has brought benefits to ensuring that different perspectives were heard within the meeting. However, it has also meant that the Board was occasionally unwieldy and not sufficiently focussed and was not able to lead and influence as it would have wished.

It is therefore proposed that the core membership of the Board is reduced significantly from 32 members to 12.

## **Membership**

The Health and Social Care Act 2012, which set up Health and Wellbeing Boards, set out certain specific statutory membership – i.e. individuals who had to have a seat on the Board. These were as follows:

- at least one councillor of the local authority, which must be the Leader or their nominated alternative,
- the director of adult social services for the local authority,
- the director of children's services for the local authority,
- the director of public health for the local authority,
- a representative of the Local Healthwatch organisation for the area of the local authority,
- a representative of each relevant clinical commissioning group (the clinical commissioning groups could agree a single nominee to represent them all).

The rest of the membership was a matter for local determination. The Board is unusual for a local authority committee in that officers serve on it in the same capacity as councillors – i.e. with full voting rights.

Lancashire added representatives from the district councils, police and fire, the Acute NHS Trusts, housing providers and the voluntary, community and faith sector.

The proposal is now to make the Board more responsive and dynamic by reducing the membership to the statutory members plus two additional councillors and four representatives from the district councils, three councillors and a Chief Executive. The proposed complete list of full members is included in the revised Terms of Reference at Appendix 'A'.

In recognition of the fact that the other partners still have a crucial part to play, it is proposed that the Board can invite any other representatives to attend and participate (though not vote) as is considered necessary for a particular task or meeting.

## **Other changes**

There are no other substantive changes to the Terms of Reference, although some aspects of the "meeting arrangements" section have had minor changes made to reflect the membership changes.

## **Consultations**

N/A

## **Implications:**

This item has the following implications, as indicated:

## **Risk management**

The Health and Wellbeing Board is a statutory committee, and various provisions relating to its functions and membership are set out in legislation. The proposed changes are in line with those requirements.

There are no financial implications.

## **List of Background Papers**

Paper	Date	Contact/Tel
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None

Reason for inclusion in Part II, if appropriate

N/A





## Lancashire Health and Wellbeing Board Terms of Reference

### 1. Purpose

To achieve the best possible health and wellbeing outcomes and reduce health inequalities in Lancashire.

### 2. Functions

To achieve the purpose outlined above, the Health and Wellbeing Board will deliver the following key functions:

**Enable shared understanding** - to lead the development of a Joint Strategic Needs Assessment and ensure that it is informing the development of plans and priorities of the Board and its partners.

**Develop a Health and Wellbeing Strategy** – to agree a Health and Wellbeing Strategy and work in partnership with our system partners to support the delivery of this Strategy.

**Provide System Leadership** – to lead and direct the health and wellbeing system to ensure we continuously improve our services and make the best use of resources that deliver better outcomes for people.

**Seek Assurance** through monitoring and evaluation of the health and wellbeing strategy and where necessary provide appropriate and effective challenge.

**Accountability** – to be able to demonstrate and evidence that the decisions of the Board, and their subsequent outcomes, are clearly focused on improving the health and wellbeing and reducing health inequalities in Lancashire.

**Commissioning** - to enable collaboration between commissioners, joint commissioning and pooled budgets, where this provides better integrated service delivery and outcomes.

**Engagement** – listen to and understand the needs of local people; to ensure there is effective dialogue and engagement with our communities, and joint working between the county council, our district councils, local NHS and with other key strategic partnerships via. Safeguarding Boards, Local Economic Partnership, Children and Young People Partnership, Community Safety Partnership etc.

**Integration** – to promote integration and partnership working between the NHS, local government and wider public, private, voluntary, community and faith sector.

### 3. Principles

The Health and Wellbeing Board members recognise shared values as the foundation of a strong partnership and through trust, openness, equality and fairness

will ensure a strong and sustainable partnership that delivers improved health and wellbeing outcomes and reduce health inequalities in Lancashire.

**Trust** – to have confidence in the integrity and ability of all partner organisations working collaboratively through the Health and wellbeing Board.

**Openness** – demonstrating transparency and openness between partners in how decisions are made and in sharing activities, plans and ambitions.

**Equality** – each partner organisation/sector has an equal standing within the Health and Wellbeing Board.

**Fairness** – commitment throughout the Health and Wellbeing Board that the behaviour and actions of partners is equitable, impartial and objective.

#### **4. Membership**

The membership of the Lancashire Health and Wellbeing Board is comprised of the following:

- The Cabinet Member for Health & Wellbeing (Chair)
- The Leader of the Council\*
- The Lead Member for Health
- Executive Director of Adult Services and Health & Wellbeing\*
- Executive Director of Education and Children's Services\*
- Director of Public Health\*
- 1 member (Chair, CEO or Executive Director) to be nominated by NHS Lancashire and South Cumbria Integrated Care Board\*
- Three District Councillors (one from each of the sub areas of Lancashire, to be nominated by the Lancashire Leaders Group)
- One District Council Chief Executive (to be nominated by the Lancashire Chief Executives Group)
- The Chair of Healthwatch\*

\*Members marked with an asterisk are statutory members who must be on the Board to meet the requirements of the Health and Social Care Act 2012.

All Board members to have one vote each.

The Board may invite any other representatives to meetings of the Board as it deems appropriate. Such representatives will not be formal members of the Board and they shall not have a vote, but may participate in the debate with the consent of the Chair.

#### **5. Meeting Arrangements**

The Health and Wellbeing Board is a committee of the County Council and unless specified below, meeting arrangements are subject to the County Council's procedural Standing Orders:

- The Board will appoint the Deputy Chair annually from amongst the voting membership.
- The Board will meet at least four times a year. Additional meetings may be arranged by resolution of the Board or with the agreement of the Chair.
- Meetings will be at County Hall, Preston, unless otherwise agreed by the Board.
- Decisions will be made by consensus where possible, or when appropriate by a majority vote.
- In the event of a tied vote, the Chair has a second or casting vote.
- The quorum at a meeting of the Board shall be a quarter of the whole number of voting members of the Board with at least one Cabinet Member being present.
- Substitutes for Board members are permitted with written notification being given to the Clerk by the relevant nominating body in advance of the meeting.
- The Board may invite any other representatives to meetings of the Board as it deems appropriate. Such representatives will not be formal members of the Board and they shall not have a vote, but may participate in the debate with the consent of the Chair.
- Meetings of the Board are open to the public but they may be excluded where information of an exempt or confidential nature is being discussed – see Access to Information Rules set out at Appendix ‘H’ in the County Council's Constitution.
- The Board cannot discharge the functions of any of the Partners.

