



HEALTH AND WELLBEING BOARD

13th February 2020

Health and Wellbeing Board Development - Final report from Task and Finish Groups

Report of: Director of Children's Services and Adult Social Care

Cabinet Member: Cllr Richard Dodd, Business Chair

Purpose of report

The purpose of this report is to present the conclusions of the three Health and Wellbeing Board (H&WB) development Task and Finish (T&F) Groups, the Terms of Reference (ToRs) for which were agreed at the September 2019 meeting of the Board.

Recommendations

The Board is recommended to:

- Comment on and approve the revised ToRs, reporting arrangements, proposal to reduce the frequency of meetings to bi-monthly and supporting operating principles;
- Comment on and support the recommendations for raising the profile of the Health and Wellbeing Board and for communication and engagement; and agree a mechanism to implement them;
- Comment on and support the plans to refresh the Joint Strategic Needs Assessment (JSNA) and the development of a Joint Health and Wellbeing Strategy performance dashboard and outcomes framework.

Link to Corporate Plan

The H&WB has a responsibility which spans all health and social care and health-related activities. As such, the outputs of the Board are linked to all five priorities within the corporate plan.

Key Issues

Following a H&WB development session in July 2019 focused specifically on how the Board could function more effectively, three T&F groups were set up to lead on revising the ToRs and reviewing the work programme; raising the profile of the Board through communications and engagement; and measuring the impact of the Board. This report summarises their outputs and recommendations.

The ToRs have been revised to reflect maturity within the Northumberland system; ongoing changes in NHS planning processes; and the delivery of the Northumberland JHWS. A set of core principles have been developed to improve the management of the forward plan/work programme and to reduce overlap between the H&WB and the council's overview and scrutiny committees. The Board will make more use of development sessions to explore specific areas of interest and concern and reduce the number of meetings to six or seven per year plus up to three development sessions.

A number of options to increase the profile of the Board and develop a more proactive communications and engagement approach have been developed. These include the use of thematic agendas for meetings throughout the year; changing the venue for meetings to facilitate access to a wider population; and ensuring agendas are in plain English and jargon free and using a separate public facing presentation style which is more engaging. The group has also considered the use of different methods of communication such as filming, twitter and a dedicated website. These have resource implications which would need to be explored in more detail and would require more in depth legal consideration before being developed further.

The two key outputs of the Board are the JSNA and the JHWS so measuring impact should be undertaken in the context of these two functions. A complete revision of the JSNA is already in progress. The topics being refreshed in 2020 are mental health, end of life care, crime and community safety and priority topics which fall within the Best Start in Life theme of the JHWS. A performance dashboard will be developed to track the delivery of actions which are components of the JHWS action plans. An overarching outcomes framework will also be developed to monitor the impact of these activities on population health outcomes.

Background

Following the successful Board development session held on 11 July 2019 and as discussed at the Board meeting on 8th August 2019 it was agreed that three T&F groups be established to specifically look at the following:

- Role and purpose of the H&WB;
- Engagement and commitment; and
- Impact.

These T&F groups met over the period October 19 to January 20 and their conclusions and recommendations are summarised in this report.

ToRs and governance of the Northumberland H&WB

The aim of this group was to improve the function and operation of the Board with the following objectives:

- Review the membership to ensure it reflects and accommodates changes in the delivery of health, care, health-related activities and the Joint Health and Wellbeing Strategy (JHWS);
- Review the ToRs to provide clarity on the role and purpose of the Board and its

- members, ensuring that it is aligned with and does not duplicate the roles of Overview and Scrutiny Committees (OSCs);
- Agree a process to proactively manage the agenda, forward plan and work of the Board to maximise the value and input of the Board and ensure the agendas and work programme are balanced;
 - Review the governance arrangements in terms of both the reporting of the Board and those functions reporting to the Board.

Membership

The membership has been reviewed and it is proposed that this is extended to encompass Newcastle Upon Tyne NHS Foundation Trust (as the other large provider of healthcare to Northumberland residents) and the Executive Director of Commercial, Economy and Regeneration (to represent the wider determinants of health theme of the JHWS). Associate members may be invited to participate as and when appropriate e.g. the Police and Crime Commissioner. As the Board continues to develop, membership may be broadened to reflect wider issues impacting on health.

Terms of Reference

The proposed ToRs (Appendix 1) reflect the new JHWS which encompasses a number of the objectives in the current ToRs e.g. To hold the system to account to prioritise early intervention and primary prevention; to set out the strategic vision for Northumberland. A set of operating principles are proposed to ensure that the role of the H&WB is deconflicted with the LA overview and scrutiny committees, taking into account the fact that whilst both are a formal committee of the LA, the H&WB is currently a partnership forum with much wider membership. The ToRs will be augmented by a governance structure diagram to identify the major Boards and committees which are accountable to the Board (Appendix 2).

Getting the best out of the Board

The Board is an outlier in having monthly meetings; bi monthly meetings are more common and in Northumberland's case, it is suggested these are augmented by additional development sessions up to 3 times a year. The development sessions are intended to provide Board members with the opportunity to explore issues in more depth in a safe environment. To support the reduction in meetings, a set of operating principles have been developed to help manage the forward plan, agenda and workload. These are:

- Reports will be brought to the Board for a specific purpose, where the Board can add value and where it links to the ToRs not just for the H&WB 'to note'. In some cases, national good practice may dictate that reports come to the Board and these should be accommodated where possible.
- Where reports are being considered at both the Board and OSC, it should be explicit what the role of the H&WB is before being added to the work programme. It will be appropriate for some reports to go to both, particularly when the H&WB's position on an issue adds to the evidence being considered by OSC;
- Only high level strategies and plans should be considered by the H&WB. Where possible, others should be accommodated within the workstreams of other forums such as the System Transformation Board or Children and Young Peoples'

Strategic Partnership. Any strategy or action plan which contributes to the delivery of the JHWS should be considered by the lead group for each strategic theme and reported back as part of the JHWS thematic reporting and monitoring process;

- The H&WB should not consider the delivery of specific health and wellbeing services, the detailed performance of services, the outputs and outcomes of specific services or be the main vehicle for the patient voice. The only performance the H&WB should be monitoring is that of the JHWS and any committees for which the Board provides sole accountability;
- Themes of the JHWS will report every 6 months.

Governance

The Board in its entirety is accountable to the Health and Wellbeing OSC.

Profile and Communications and Engagement of the Health and Wellbeing Board

The aims of this T&F group was to clearly articulate and publicise the profile and purpose of the H&WB across all stakeholders; and enhance interactive communication and engagement. Agreed objectives were:

1. Profile of the H&WB.

- Develop the H&WB narrative and story based on the H&WB strategic themes and outcomes expected in years - short, medium and long term;
- Focus on outcomes, wellbeing, prevention and early intervention;
- Develop approaches whereby the H&WB has 'teeth' in the wider system.

2. Engagement and commitment .

- Develop ideas for outreach sessions/proactive roadshows;
- Plan for community engagement;
- Look at collective engagement on behalf of the system – with a proactive plan of themes and focus areas;
- Consider themed session four times a year – based on four core themes of the strategy;
- Report metrics, public stories and outcomes regularly.

Introduction

The second Task and Finish Group was set up to explore ways in which the Board can further enhance its profile, communication and engagement with the public as outlined above. The Group's proposals, which include the introduction of a number of communication and engagement tactics, are outlined below. The Group also considered advice from Democratic Services in terms of the logistics and achievability of some of the recommendations; and suggests involvement of the Communications Team when any recommendations are approved for further work.

Stronger focus on the four Health and Wellbeing Strategy work stream areas with identified councillor and officer champions

To ensure the views of the public are at the heart of the Health and Wellbeing Board the Group recommends increased engagement activity on the four themes of the Joint Health and Wellbeing Strategy; linked to thematic items on the Board's agenda. This engagement, which could include drop-in sessions or attendance at community meetings could be led by nominated champions of the four work stream areas, who could feedback to the Board the findings of their engagement. This would ensure that the public are directly involved in any decisions affecting their Health and Wellbeing. Please note that this does not replace the extensive engagement undertaken across the system when major changes are in development or new services delivered.

Themes throughout the year

Another recommendation the Group proposes is to develop a forward plan of themes for each meeting. By giving a theme to meetings, members of the public with an interest in these areas would be more likely to attend. In addition, we would recommend inviting guest speakers to give talks and/or presentations on the selected topics in relation to key agenda items.

Locations

Taking the meetings out as a roadshow, especially given the diversity of the Northumberland people and landscape, would be very beneficial for engaging with hard-to-reach communities. This will also ensure equity of access to meetings.

Identifying which themes are more applicable to certain areas of Northumberland could also assist with selecting the location for the meeting venues, if it is decided to adopt the roadshow approach to meetings. For instance, if there is an issue identified with elderly care in Blyth, it would be sensible to hold a meeting in Blyth around elderly care and invite Age UK and others to give a presentation or be involved.

Furthermore, it is worth considering taking these meetings to less formal locations. For example, community centres, bingo halls, working men's clubs, or libraries where members of the public may feel more relaxed and therefore perhaps more willing to engage. It is possible that some engagement with the public could be undertaken via the Local Area Council meetings most of which are already held at venues outside of County Hall. Logistics and accessibility are both important aspects of this and Democratic Services advise using locations that are accessible for transport and mobility for example. Locations are also extremely varied in relation to WiFi connections and other technologies.

Agendas

Producing softer-worded agendas which are easy to understand by the general public would be more beneficial in helping the public understand the issues being discussed. The Local Government Association recommends that agendas are written jargon-free and in plain English. Another option to consider is to have a separate agenda for the public, branded and designed so it is eye catching and interesting to read. This could mirror the same design as the webpage, making the Health and Wellbeing Board branding clearly

identifiable. A template design could be produced allowing content to be changed and updated in-house.

Methods of Communication and Engagement

Filming – live streaming versus recorded. Recommendations from the Local Government Association indicate that Health and Wellbeing Boards should use live streaming to promote transparency. However, from recent research and discussions at the task and finish group found that live streaming, in real-time, does not receive many views or generate much engagement (Southwark estimates around 1-7 views at most). However, from speaking with York's and also Southwark's Health and Wellbeing Boards, the Group discovered that pre-recorded videos receive much more views once uploaded. Southwark estimates it receives around 33 - 116 views after uploading and York has found that most of its live stream views happen post upload; although York did not have a figure for the number of post-upload views.

The Group agreed that live streaming would not be the most beneficial engagement tactic going forward. Based on research, it is deemed more appropriate to film meetings and then upload them to a dedicated health and wellbeing YouTube channel. This still allows for transparency, but with more control over content.

Research has found that Manchester City Council and York City Council both edit these films into easy-to-navigate, user-friendly chapters. General consensus from the Group is that it would be useful for Northumberland's Health and Wellbeing Board to also follow this process, noting the resources required to do so.

Quality filming requires the right equipment and the Group suggests starting this when the new build is complete and professionally kitted out. This also does impact on meetings in other locations and the logistics of professional filming across the county. The Group notes that in other places the increased recordings attracted increased numbers of Freedom Of Information requests to the Council concerned.

Twitter. The Group recommends a dedicated Twitter account which would allow people to tweet messages directly to the Board and this is something that the Local Government Association recommends. By using a unique and separate handle, members of the public can engage directly with the Board by tagging them in tweets, whereas hashtags alone do not allow for direct tagging.

The Group proposes a pilot of a unique Twitter hashtag such as #NLandTalksHealth which could be used to host regular chats and also for online engagement during the meeting with a dedicated 'tweeter' during the meetings who can share key messages and topics in real-time.

Piloting a unique hashtag alongside a unique Twitter account means the Board can start regular online conversations with the public at specific times. For example, a regular Tuesday or Wednesday lunch time chat. According to Sprout Social (a social media management platform) these are the best days for engagement. These Twitter chats (and interaction on Twitter overall) can allow information to be collected and drip-fed to the Board in between meetings and this can help shape the topics. Piloting this for 2-3 months

and recording feedback should give an outline of its success and any changes going forward.

Health and Wellbeing Boards which have good Twitter engagement are Leeds City Council, Surrey and Birmingham.

There are resources and logistics required to deliver this including control of the account, access, and the need for concise and consistent messaging.

Website. The Group proposes keeping the health and wellbeing page connected to the council website, but to have its own brand and identity. This means fewer resources will be required to maintain a full website, but will allow the Board to have its own identity within the council.

The Group proposes that Northumberland produces a unique brand image for the Health and Wellbeing Board and develops a more media-rich webpage, including videos, teaser videos in the run up to events, interviews with guests, blogs, vlogs, images and more bite-size digestible text.

Leicester City Council’s webpage is part of the council website and is a good example of breaking up text into a more user-friendly design.

Summary

The Group’s recommendations are summarised in the table below. These have been discussed with democratic services; and communications colleagues in the council who advised that the proposals are shared with the council’s legal team before any final decision is taken.

Topic	Recommendation	Examples (Appendix 2)
Themes throughout the year	<ul style="list-style-type: none"> ● Based on the four work streams in the Health and Wellbeing Board Strategy ● Based on particular community needs ● Consider national awareness days/months ● Lead by champions of the four workstream areas 	Best start in life Wider determinants Integration Empowering people and communities
Locations	<ul style="list-style-type: none"> ● Take meetings out as roadshows to hard-to-reach communities ● Consider less formal venues such as libraries and community centres. 	Brent CCG
Agendas	<ul style="list-style-type: none"> ● Separate branded agenda for public ● Mirror website design ● Written jargon free with interesting content 	Recommendation from the Local Government Association https://www.local.gov.uk/sites/default/files/documents/connecting-health-and-wel-7bc.pdf

Filming	<ul style="list-style-type: none"> ● Not to live stream but to pre-record ● Upload to YouTube ● Break-down into chapters in video description ● Consider resources to handle increase in FOIs 	Manchester York Southwark
Twitter	<ul style="list-style-type: none"> ● Create a separate Twitter handle ● Create, and pilot, a Twitter chat #NLandTalksHealth and hold a lunchtime engagement session on a Tuesday or Wednesday 12-1pm ● Use Twitter interaction to capture information in between meetings ● Share wider health and wellbeing news and updates from organisations such as Healthwatch, Active Northumberland etc ● Have a dedicated 'tweeter' at meetings # ● Consider who will control the account 	Surrey Leeds Birmingham
Website	<ul style="list-style-type: none"> ● Own webpage and branding which sits under the council website ● Bite-size text, videos (including teaser videos), images, agendas, blogs 	Leicester Sandwell

Impact of the Health and Wellbeing Board

Aims

To ensure that the outcomes of the H&WB 10 year plan are the focus of all work across the partnerships and that the added value of the H&WB is fully recognised.

Objectives

- To undertake a refreshed full JSNA.
- Develop a performance dashboard for the JHWS.
- To develop an outcomes framework to support the H&WB work
- To use the above to identify and track short/medium/longer term progress

Joint Strategic Needs Assessment

The JSNA is in the process of being updated. The 2020 topics to be refreshed are Mental Health, End of Life Care, Crime and Community Safety and priority topics which fall within the Best Start in Life theme of the Joint Health and Wellbeing Strategy.

Performance dashboard for the JHWS

Following the presentation of a high-level action plan to the H&WB in August 2019, detailed action plans for each theme of the JHWS are currently in development. It is proposed that a monitoring and evaluation framework is developed to track the delivery of these actions and enable timely reporting to the H&WB. It is recommended that the H&WB agree an appropriate timescale for the delivery of these action plans; monitoring and evaluation data gathered over this period will then be used to support impact analysis which will serve as the basis for action planning activities for future periods. This will enable the strategic approach to be continuously refined to maximise impact, with issues escalated to the H&WB for decision where appropriate.

Outcomes Framework

Whereas the Performance Dashboard outlined above will track the delivery of actions, it is proposed that an overarching Outcomes Framework be developed to monitor the impact of these activities on population health outcomes. Indicators will be developed for each theme of the JHWS which will be monitored over the course of the strategy, with this evidence supporting strategic and operational planning during that period. The input of the relevant thematic working groups will be sought where necessary to ensure alignment with service planning and delivery.

Impact monitoring

The Task and Finish group will continue to develop and update a project plan to drive forward the delivery of the proposals outlined above. Once finalised, a proposed timeframe for the completion of the performance dashboard and outcomes framework development will be presented to the H&WB.

Appendices

1. Draft revised ToRs
2. Governance diagram
3. Communication examples from other Health and Wellbeing Boards

Implications

Policy	Proposals to change the way the H&WB functions will need to be considered in the context of related policies and procedures for other LA committees. This may impact the level to which the recommendations can be delivered.
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Finance and value for money	Changing venues for the Board may have a cost implication in terms of room hire. Proposals for alternative mechanisms for communication and engagement need to be considered in the context of the refurbishment of County hall which may accommodate some of the technical recommendations such as filming. A different approach could increase the inclusiveness of the Board's work, extending its reach and value for money. Proposals which have a cost implication will be the subject of a costing exercise, the funding of which would need to be agreed by H&WB partners.
Legal	The legal implications of alternative communication and engagement approaches would need to be considered as part of the development process.
Procurement	None immediately identified
Human Resources	There is a recommendation that an additional Executive Director representing the wider determinants of health sits on the Board. Some of the communications and engagement approaches would require additional capacity to deliver.
Property	None identified
Equalities (Impact Assessment attached) Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>	
Risk Assessment	Not undertaken
Crime & Disorder	None
Customer Consideration	The Board has explicitly considered how its work can be made more inclusive, accessible and engaging.
Carbon reduction	Moving the location of the Board may alter miles travelled but the impact is dependant on the circumstances of individual Board members and could be offset with simple mitigation measures if necessary.
Wards	The work of the H&WB has implications for all wards

Background papers:

None

Report sign off.

Authors must ensure that officers and members have agreed the content of the report:

	Full name of officer
Monitoring Officer/Legal	Liam Henry
Service Director of Finance & S151 Officer	Chris Hand
Relevant Executive Director	Cath McEvoy-Carr
Chief Executive	Daljit Lally
Portfolio Holder(s)	Richard Dodd

Author and Contact Details

Elizabeth Morgan FFPH - Director of Public Health

Email: elizabeth.morgan@northumberland.gov.uk

Terms of Reference

NORTHUMBERLAND HEALTH AND WELLBEING BOARD

1. MEMBERSHIP

NCC Business Chair (Cllr R Dodd)

Council Leader - Cllr P Jackson

Portfolio Holder Adult wellbeing and health - Cllr V Jones

Portfolio Holder Childrens Services - Cllr W Daley

Portfolio Holder Culture, Arts, Leisure, Tourism and Voluntary Services - Cllr C Homer

Labour representative - Cllr S Dungworth (Subs Member Cllr L Dunn)

Exec Dir Childrens Services and Education - Mrs C McEvoy-Carr (Substitute Mr D Jackson/Mr G Reiter)

Exec Dir of Commercial, Economy and Regeneration - TBC

Director of Public Health - Miss E Morgan

NHS Northumberland CCG (x 2 representatives)

Chief Operating Officer (Ms S Brown)

Clinical Chair (Dr G Syers) (Vice Chair)

Substitute for Clinical Chair - CCG Medical Director (Dr J Warrington)

Northumbria Healthcare NHS Foundation Trust (x1 rep)

Chief Executive (Sir J Mackey)

Substitute - Dir Communications and Corporate Affairs (Ms C Riley)

Northumberland Tyne and Wear NHS Foundation Trust (x1 rep)

Deputy Chief Operating Officer (Mr T Docking)

Newcastle Upon Tyne NHS Foundation Trust (x1 rep)

TBC

North East Ambulance Service (to be invited)(x1 rep)

Chief Executive (Ms H Ray)

NHS England (x1 rep)

TBC

Voluntary Community and Social Enterprise Organisations (x1 rep)

Mr R Firth (Age UK)

Substitute - Ms S O'Neill (Cygnus Support)

Healthwatch (x1 rep)

Chief Executive - Mr D Thompson

Substitute - Ms D Nugent

Local Medical Committee (x1 rep)

Dr J Lothian
Local Pharmaceutical Committee (x1 rep)
Ms C Wardlaw
Childrens and Adults Safeguarding Board (x1 rep)
Chair Adults Safeguarding Board - Mrs P Mead

2. TERMS OF REFERENCE

The Northumberland Health and Wellbeing Board's work covers the following areas:

- Statutory functions – responsibilities given to it by law and which it must do;
- Development and improvement functions – work which the Board has chosen to do to ensure health and wellbeing services meet the needs of the people of Northumberland.

Statutory functions

- (1) To encourage all health and care organisations which operate within Northumberland to work together in an integrated manner.
- (2) To provide all appropriate advice, assistance and support to encourage the development of formal partnership arrangements between social care and health services, making use of the powers provided by Section 75 of the NHS Act 2006.
- (3) To produce and maintain the Joint Strategic Needs Assessment (JSNA) for Northumberland, covering all needs which either fall within the responsibilities of health commissioners, but could alternatively be met or significantly affected by local authority functions or vice versa.
- (4) To produce a joint health and wellbeing strategy (JHWS) for Northumberland, on behalf of the Council and NHS Northumberland Clinical Commissioning Group.
- (5) To ensure that Healthwatch Northumberland and the people who live and work in Northumberland are involved in the production of the JSNA and the JHWS.
- (6) To maintain and update Northumberland's Pharmaceutical Needs Assessment.
- (7) To respond to any pharmacy contract consolidation request submitted to NHS England within the statutory timeframe.

Development and Improvement Functions

- (8) To improve democratic accountability for health and wellbeing decision making.
- (9) To provide a focus for Health and Wellbeing Board partners and total public sector commitment to improving population wellbeing and health outcomes.
- (10) To ensure that communities and service users are involved in determining needs and in designing, developing and delivering services.

(11) To monitor and report progress within the priorities identified within the JHWS and to hold partners to account including the ICS, ICP and System Transformation Board. This may be done through Joint Health and Wellbeing Boards across the ICP footprint.

(12) To advise all partners and stakeholders on steps that they could take to reduce health inequalities within Northumberland and between Northumberland and England as a whole

(13) To promote broader integration and partnership working between the NHS, LA, other public sector organisations and the VCSE.

(14) Any other functions that may be delegated by the Council under section 196 (2) of the Health and Social Care Act 2012.

(15) To provide an annual report to the Health and Wellbeing OSC; and undertake regular reviews of the Board's activity to ensure that it is achieving what it is setting out to do.

3. MEETINGS

The Board normally meets seven times a year.

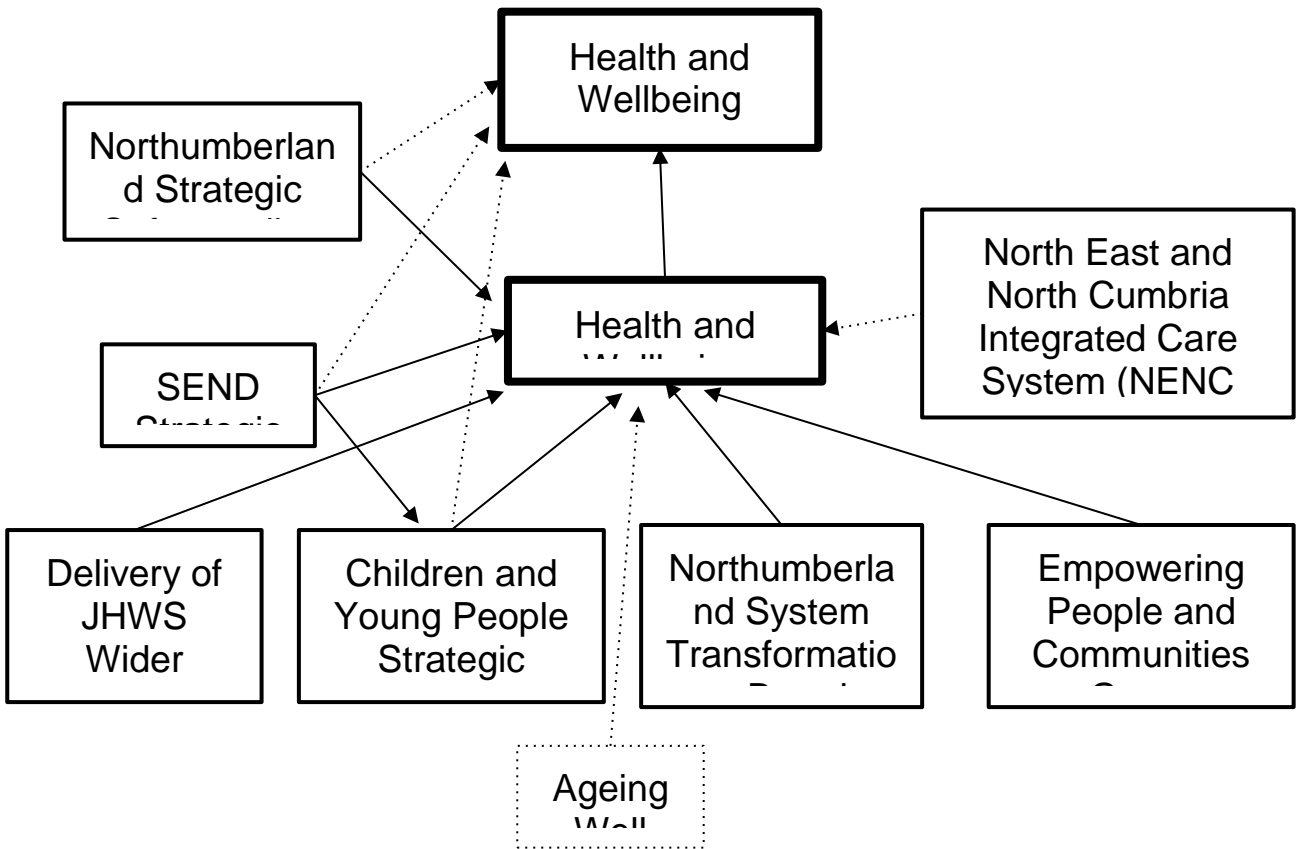
Quorum

The quorum for Board meetings is six Members.

Decisions

Although the Board is a committee of the council, it is also a partnership and on this basis, any decisions made by the Board are to be based on consensus.

Northumberland Health and Wellbeing Board governance structure

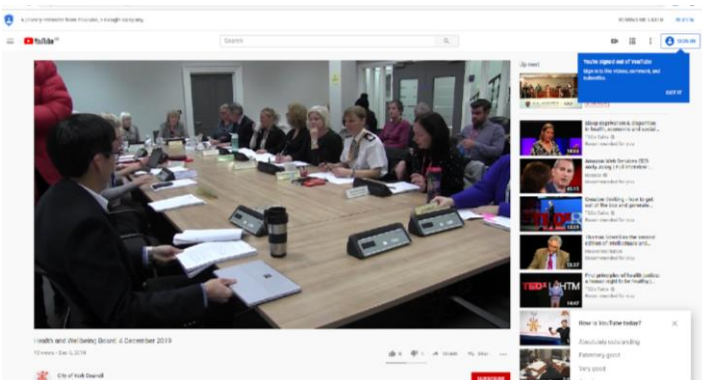


Communication Examples from Health and Wellbeing Boards

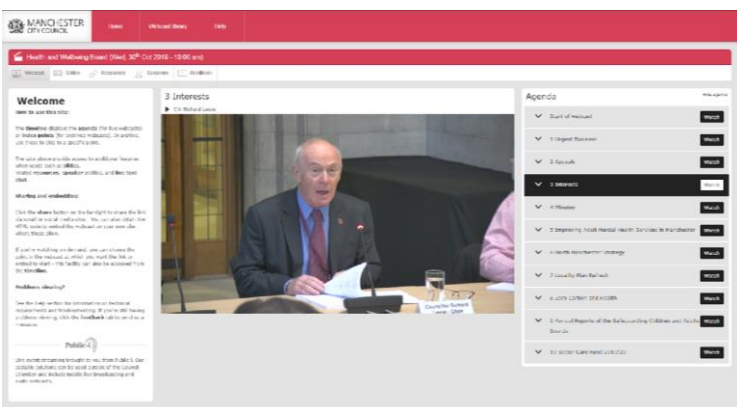
Example 1 - Southwark Council Health and Wellbeing Board live stream



Example 2 – York City Council Health and Wellbeing Board live stream



Example 3 – Manchester Health and Wellbeing Board live stream



Example 4 - Leeds Health and Wellbeing Board Twitter



Example 5 – Surrey Health and Wellbeing Board Twitter




Example 6 – Birmingham Health and Wellbeing Board Twitter



Example 7 – Sandwell Health and Wellbeing Board webpage

Home > Health and social care > Healthy Sandwell, healthy you > Sandwell Health and Wellbeing Board

Sandwell Health and Wellbeing Board



Sandwell's Health and Wellbeing Board brings together influential people from the council and NHS - including council cabinet members (councillors) and doctors responsible for planning and arranging health services - and a community representative from [Healthwatch Sandwell](#). We make sure that services work together with the same aims, so that resources (time, money and people) are used where they can make the biggest impact. By working together, we will be more effective than working separately.

We want everyone in Sandwell to have an equal opportunity to live a healthy, happy and fulfilling life. As a council, we have a responsibility to make sure that the services we provide or arrange help improve the lives of all our citizens. The council must work closely with health and community services and with local people, if we are going to improve health and wellbeing. The meetings are held in public and you can view the agenda and accompanying papers before the meeting using our [Council Management Information System](#) - [Who sits on the board?](#)

News update

Our Chair, Cllr Yvonne Davies wants to keep everyone updated on what's happening at the Board. [Read March's blog here](#)

The last board meeting was held on Thursday 25 July 2019 above the Council Chambers of Sandwell Council House in Oldbury. You can find the agenda and papers [here](#).

The next meeting will be held on 19 September 2019 from 4.30 - 6.30pm in Committee Room 1 at Sandwell Council Chambers in Oldbury. The papers are published 5 working days in advance of

- Healthy Sandwell, healthy you
- Alcohol Services
- Best Start
- Drug Services
- Feel Good 6
- Get Active
- Healthy Faring
- Healthy Sandwell
- Keep what keep well
- Local health services
- Mental health and wellbeing
- NHS Health Check
- Sandwell Health and Wellbeing Board
- Social health
- Smoking
- Time to get active
- Wellbeing

Example 8 - Leicester City Council Health and Wellbeing Board webpage

Leicester City Council [My Account](#) [A-Z](#) [Menu](#)

Home / Your council / Policies, plans and strategies / Health and social care / Health and Wellbeing Board

In this section

- Health and social care
 - Data, reports and information
 - Deprivation of liberty safeguards (DOLS)
- Health and Wellbeing Board**
 - Corporate parenting strategy

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Health and Wellbeing Board

Leicester's Health and Wellbeing Board works in partnership with local communities and healthcare providers to develop and deliver health and wellbeing strategies.

Quick links

➔ [What's the Joint Health and Wellbeing Strategy all about? Watch a clip on YouTube](#)

You can view the Overview of Leicester JSNA Programme on the following link:

- [Overview of Leicester JSNA Programme](#)

What is the Health and Wellbeing Board?

Health and wellbeing boards have been introduced across all local authorities by the government. Leicester's Health and Wellbeing Board has been set up to develop and deliver joint health and wellbeing strategies through partnership working. It replaces the shadow health and wellbeing board that had been in existence since 2011. You can download a copy of the terms of reference at the bottom of the page.

What will the Health and Wellbeing Board do?

The board will help us to work in partnership with the Leicester City Clinical Commissioning Group and the NHS Commissioning Board, together with a representative of the new Healthwatch and the police, to develop joint health and wellbeing strategies.

These will set the local framework for commissioning health care, social care and public health, which will help us work more closely and understand our local community's needs and agree priorities.

What will the board have a duty to do?

As a formal committee of the council, the board will have the following minimum statutory functions: