

Appendix 1

Introduction

The Cambridgeshire & Peterborough Health and Wellbeing Board (HWB) is established as a committee of the County Council under section 102 of the Local Government Act 1972. Its remit is to work to promote the health and wellbeing of Cambridgeshire's communities and its focus is on securing the best possible health outcomes for all residents. This involves a system level partnership with NHS and Local Government as equal partners and the alignment of partners' strategies across the system.

In consideration of the developments around the Integrated Care Partnerships (ICPs), Cambridgeshire & Peterborough HWB aims to ensure that integration is closely linked to prevention and tackling the wider determinants of health. A joint Cambridgeshire & Peterborough HWB has collective accountability and responsibility for population health care outcomes. The Board maintains its separate statutory identity from the ICP but where possible meets as a committee in common. It is the intention to have one shared Cambridgeshire & Peterborough Health & Wellbeing Strategy that is owned across the local system.

Membership

Membership from the Health and Wellbeing Board is 20 members, with an additional nine from the Integrated Care Partnership, creating the collective board membership.

Health and Wellbeing Board Members

- Cambridgeshire County Council (CCC) Vice-Chair of Adults & Health Committee (Lead member for HWB)¹
- CCC Chair of Adults & Health Committee
- Peterborough City Council (PCC) Cabinet / Lead member for Public Health/ HWB¹
- PCC Cabinet / Lead Member for Children's Services
- PCC/CCC Executive Director of Public Health¹
- PCC Executive Director: Adults Services or PCC Executive Director: Children and Young People's Service*
- CCC Executive Director for Adults, Health and Commissioning or CCC Executive Director for Children, Education and Families.*
- District Council representative (one officer on behalf of all districts to be appointed by the Cambridgeshire Public Service Board)
- Local Healthwatch Chair¹
- Voluntary & Community Sector Representative
- Cambridgeshire Constabulary (Chief Constable or officer to be determined)
- Cambridgeshire and Peterborough Combined Authority (Chief Executive Officer (CEO) or officer to be determined)
- Chief Executive Integrated Care Board (ICB¹)
- Chair Integrated Care Board

- Representative of Cambridge University Hospitals NHS Foundation Trust (CUHFT)
- Representative of North West Anglia NHS Foundation Trust (NWAFT)
- Representative of Papworth Hospital NHS Foundation Trust
- Representative of Cambridgeshire and Peterborough NHS Foundation Trust (CPFT)
- Representative of Cambridgeshire Community Services NHS Trust (CCS)
- Primary Care Representative (South)

* One member to be agreed between the Chief Executives of Peterborough City Council and Cambridgeshire County Council.

Integrated Care Partnership Board Members

- ICB Deputy Chief Executive/ Managing Director of Strategic Commissioning Accountable Business Unit
- ICB Chief of Partnerships and Strategy
- ICB Non Executive Member
- Primary Care Representative (North)
- District Council representative (one officer on behalf of all districts to be appointed by the Cambridgeshire Public Service Board)
- Police and Crime Commissioner
- Academic Health Science Network Representative
- Voluntary and Community Sector Representative
- Mayor of Cambridgeshire and Peterborough Combined Authority

¹ Denotes statutory members of the Health and Wellbeing Board as required by Section 194 of the Health and Social Care Act 2012. There is a statutory requirement for at least one local authority councillor and at least one representative of the ICS NHS Board, to be a member of the HWB.

Summary of Functions

Delegated Authority	Delegated Condition
<p>Authority to prepare the Joint Strategic Needs Assessment (JSNA) for Cambridgeshire and Peterborough: To develop a shared understanding of the needs of the community through developing and keeping under review the JSNA and to use this intelligence to refresh the Health & Wellbeing Strategy.</p>	<p>Section 116, Local Government and Public Involvement in Health Act 2007 Section 196, Health and Social Care Act 2012</p>
<p>Authority to prepare the Joint Health and Wellbeing Strategy for Cambridgeshire and Peterborough based on the need identified in the Joint Strategic Needs Assessment and overseeing the implementation of the Strategy, which informs and influences the commissioning plans of partner agencies.</p>	<p>Section 116A, Local Government and Public Involvement in Health Act 2007. Section 196, Health and Social Care Act 2012</p>
<p>Authority to respond to consultations about commissioning plans issued by the ICB in connection with Section 26 of the Health and Social Care Act 2012.</p>	<p>Section 26, Health and Social Care Act 2012</p>
<p>Authority to encourage persons who arrange for the provision of any health or social care services in the Council's area to work in an integrated manner.</p>	<p>Section 195, Health and Social Care Act 2012</p>
<p>Authority to provide any advice, assistance and support it thinks appropriate for the purpose of encouraging the making of arrangements under Section 75 of the National Health Service Act 2006.</p>	<p>Section 195, Health and Social Care Act 2012 Section 75, NHS Act 2006</p>
<p>Authority to produce the Pharmaceutical Needs Assessment (PNA) and liaise with NHS England and Improvement (NHSE&I) to ensure recommendations and gaps in services are addressed.</p>	<p>NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (SI 2013/349)</p>
<p>To consider options and opportunities for the joint commissioning of health and social care services for children, families and adults in Cambridgeshire to meet identified needs (based on the findings of the Joint Strategic Needs Assessment) and to consider any relevant plans and strategies regarding joint commissioning of health and social care services for children and adults.</p>	

Delegated Authority	Delegated Condition
To identify areas where joined up or integrated commissioning, including the establishment of pooled budget arrangements, would benefit improving health and wellbeing and reducing health inequalities.	
By establishing subgroups as appropriate give consideration to areas of joint health and social care commissioning, including but not restricted to services for people with learning disabilities.	
To keep under consideration, the financial and organisational implications and impact on people's experience of joint and integrated working across health and social care services, and to make recommendations for ensuring that performance and quality standards for health and social care services to children, families and adults are met and represent value for money across the whole system.	
Authority to prepare and provide Health and Wellbeing Board sign off for the Better Care Fund Plan.	
Authority to approve non-statutory joint strategies on health and wellbeing issues (e.g. Cambridgeshire and Peterborough suicide prevention strategy).	
Authority to discharge any other functions specifically reserved to be undertaken by health and wellbeing boards as set out in legislation, guidance, circulars and directives received from national government.	
Authority to consider whether ICS Board draft forward plans take proper account of the joint local health and wellbeing strategy which relates to the period (or any part of the period) to which the plan relates.	Section 14Z54 White paper
To provide oversight to the work undertaken by the member partners to take forward the Cambridgeshire and Peterborough ICB to deliver the "triple aim" duty for all NHS organisations of better health for the whole population, better quality of care for all patients and financially sustainable services for the taxpayer.	

Delegated Authority	Delegated Condition
<p>To provide a system wide governance forum, including NHS, Local Government and wider partners, to enable collective focus and direction to the responsibilities and decision making of the individual partners.</p>	

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