

# The role of the councillor on Health & Wellbeing Boards

## What this module is covering

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- **Understanding the different role and responsibilities of people on the HWB**
- **Building relationships with other stakeholders**
- **Exploring opportunities for joint working**

As you go through this module we recommend you make notes in response to the following questions:

- **What sort of role could you play on the board?**
- **What sort of relationships should the board build with stakeholders?**
  - \* *What role could you play?*
- **What sort of joint working in health and social care should be developed?**
  - \* *What role could you play?*

## Have a think...

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- **What is the most important contribution as a councillor you can make to the board?**



# Roles, responsibilities and challenges

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1. **What does each person bring to the board? (Why should they be there?)**
2. **What does the board need from each person?**
3. **What might stop each member from fulfilling their role?**
4. **How can this be overcome?**

## Member of the HWB

- **Chair of HWB**
- **Cabinet Member / Councillor**
- **Director of Adult Social Care**
- **Director of Children's Services**
- **Director of Public Health**
- **CCG representative**
- **Healthwatch representative**

## *What other councillors thought...*

	<b>Chair of the Health &amp; Wellbeing Board</b>	<b>Councillor</b>
What does this person bring to the board?	Leadership, strategic vision, chairing skills, consensus builder, enabler, community understanding, outcome focused	Democratic legitimacy, Broad knowledge of local area, Question and challenge, Ensuring tight procurement and new ways of (joint) spending
What does the board need from this person?	Work between board meetings. Ability to articulate work of board. Championing JSNA & board. Influence. Availability.	Local knowledge – looking at the bigger picture and issues prominent in particular areas in a borough, Ensuring the right financial settlements are there so priorities can be delivered – holding CCGs to account alongside Healthwatch
What might stop them fulfilling their role?	Insignificant chairing. Insignificant knowledge, Personal or political agenda. Lack of input / involvement from other board members. Lack of personal commitment or time.	Conflicting political priorities, Continuity of political members
Then how can this be overcome?	Training / support, failing this change the chair. Getting to know you sessions.	Clear basic view of what local residents need for best JSNA, Ensure HWB is place you can do business 'above politics', Evidence based decision making - depoliticising

## *What other councillors thought...*

	<b>Director of Children's Services</b>	<b>Director of Adults Services</b>
What does this person bring to the board?	Better knowledge of a very large portion of the community. Oversight of the issues which need to start in childhood eg healthy eating, health lifestyle, immunisation, sex education.	Opportunity / oversight of integration of services, Drive delivery of care at home and in the community, Drive prevention agenda: avoid acute admissions, Deliver, develop and engage the voluntary sector
What does the board need from this person?	Professional knowledge in general, ability to shape agenda for health with regard to the needs to children and young people.	Clear information on local level of need, Ideas on how to deliver effective services in different ways and for less money, Developing relationships with providers including voluntary groups, Receptive and flexible to new ideas
What might stop them fulfilling their role?	Blurring of responsibility. Children issues lost in wider agenda. Lack of resources. Lack of communication with other services. Lack of planning.	Board itself needs to function cooperatively, Clear deliverables and outcomes from a joint perspective, Knowledge of 'health' culture, Poor political direction, Budget £££!
Then how can this be overcome?	Regular review. Evaluation of the boards performance in all areas of responsibilities – to ensure chair of board enables / encourages each member to contribute productively. Action plan as to how this can be remedied.	Clear deliverables and outcomes from joint perspective, Agree clear objectives with lead members, Agreed long term strategy across political groups, Adopt best practice from elsewhere

## *What other councillors thought...*

	<b>Director of Public Health</b>	<b>Clinical Commissioning Group representative</b>
What does this person bring to the board?	Identifying needs through JSNA, Ensuring communication / engagement to identify measures and monitoring of, Regular co-ordinated reporting	Big budget holder. Tech experts. Front line contact with patients. Commission most of the services. Linked to national bodies. Medical credibility. Public trust.
What does the board need from this person?	Produce a long term, sustainable public health strategy, To be a public health champion, Direct link between health and local government, Professional advice: opportunities / consequences of £PH spend	Clinical leadership. Community information which when processed provides intelligence. Bring resources to the HWB. Representing boards priorities to the CCG.
What might stop them fulfilling their role?	Money, Political will, particularly if split council, Insufficient checking that targets are being met, Misunderstanding of role by general public	Busy with day job. Lack of resources. Lack of understanding / enthusiasm for new role etc. Lack of cohesion within CCG group.
Then how can this be overcome?	Communication and engagement with many stakeholders from Healthwatch, CCGs, local authorities, Making sure services are promoted	Offer additional support eg training admin resource. Support outside board to CCG to find person appropriate skill sets.

## *What other councillors thought...*

	<b>Healthwatch representative</b>
What does this person bring to the board?	Intelligence if specification is right, Link with members, Public voice, Element of scrutiny
What does the board need from this person?	To be clear what board wants them to provide, Different roles at different times, Quality data (not anecdotes), Not a body with a life of its own or the loudest voices, Honesty, Knowledge of what local people want
What might stop them fulfilling their role?	Lack of leadership, Resources, Ability to make up a board with right skills set
Then how can this be overcome?	Need right skills on HW to relate to HWB agenda, Cllr help to ensure that they have access to information they need, Tighter controls re commissioning the service, Build trust between participants, Develop board

# Roles, responsibilities and challenges

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- **Do your HWB board members have clearly defined roles and responsibilities?**
- **Is it important how roles & responsibilities are defined? Should the board agree them together?**

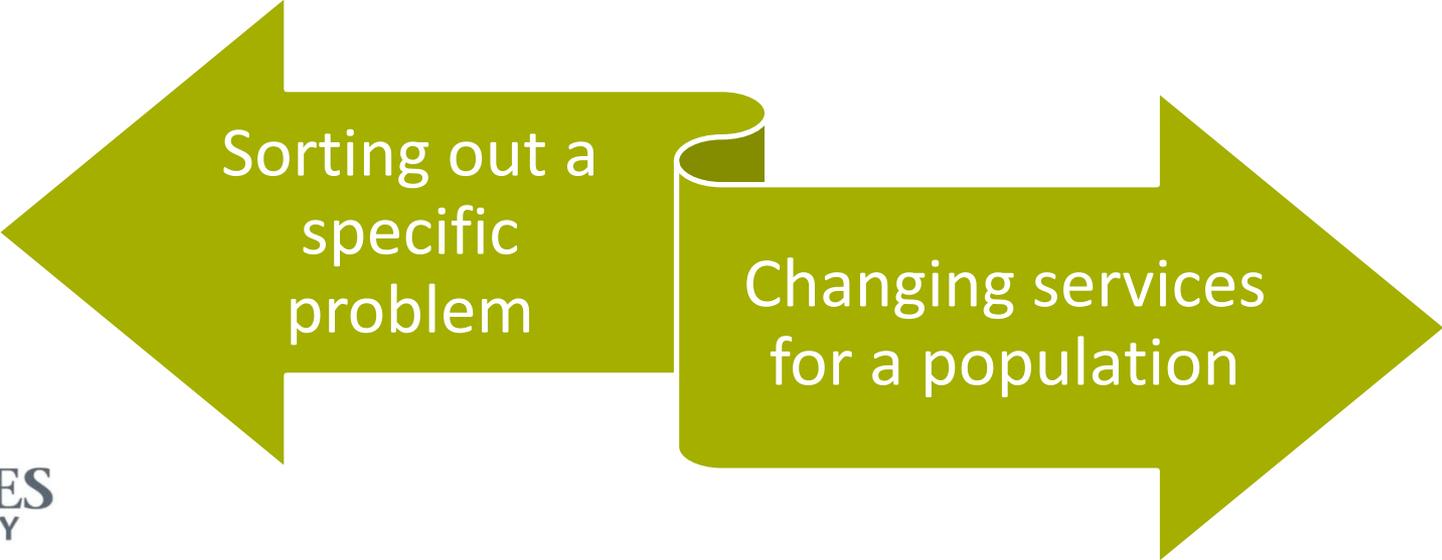
**Thinking about what other councillors thought:**

- **Do you agree with what they said? On reflection, is there anything you hadn't previously considered?**
- **Thinking specifically about your role on the board, do the responses reflect your understanding of your role?**
- **What might stop you fulfilling your role? How can you mitigate against this?**

# What level of detail does your board operate at?

As councillors, your role spans across this spectrum: from ward work on the left, to strategic oversight and policy on the right.

One of the key attributes you can bring to the board is both understanding the reality (on the left) and the context (on the right) of changes.



Sorting out a  
specific  
problem

Changing services  
for a population

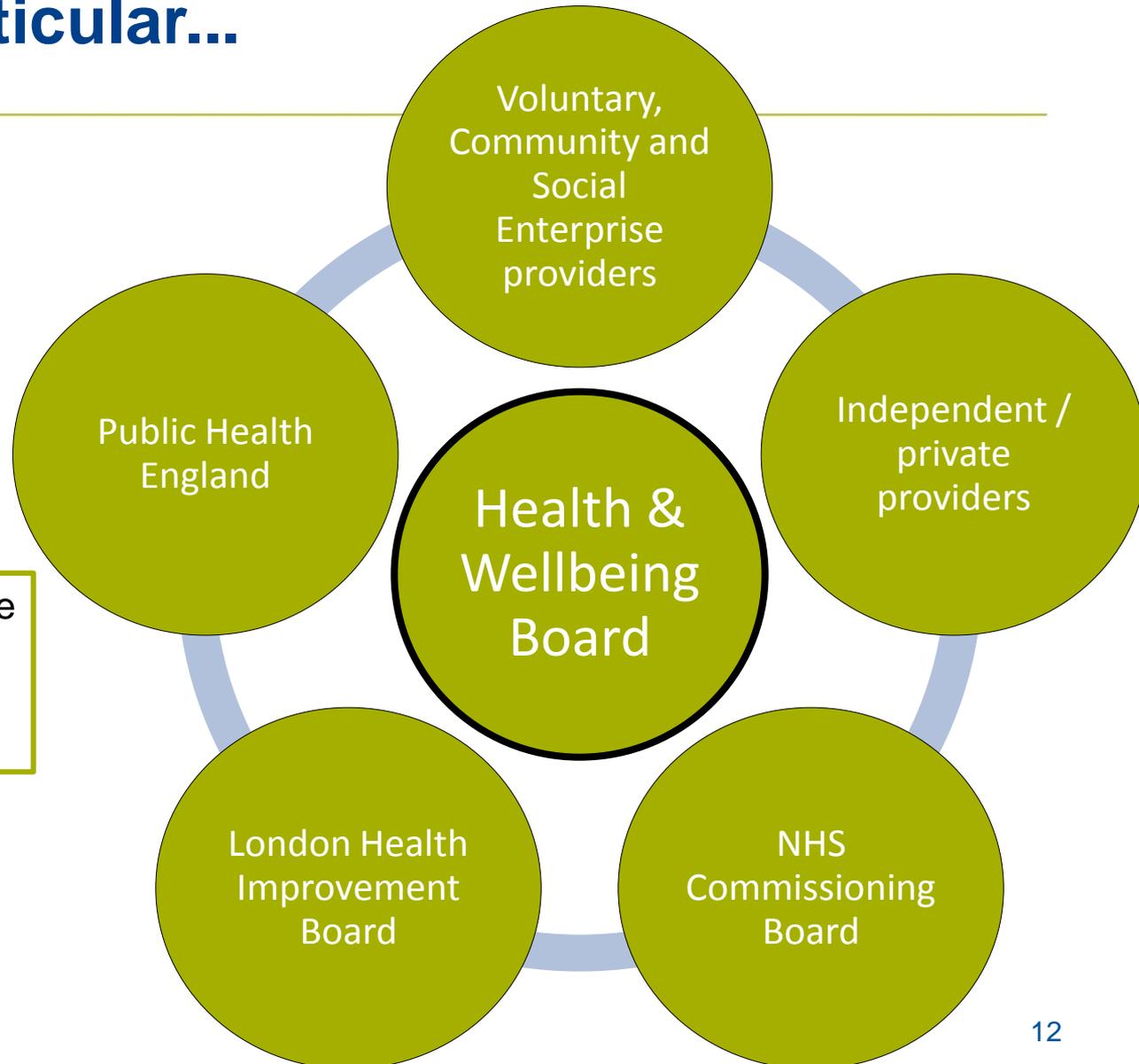


## In particular...

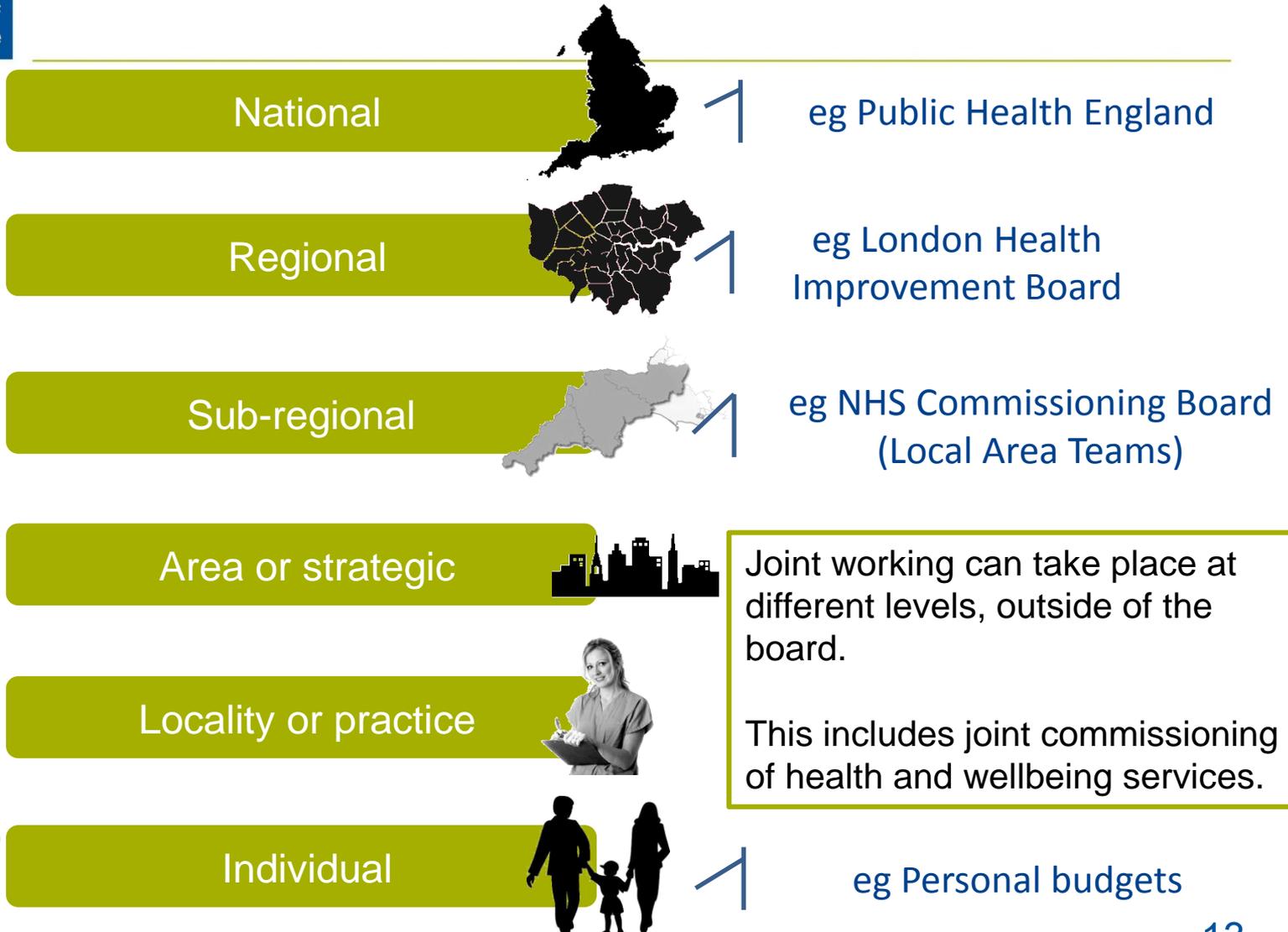
Are any of these stakeholders involved with your board?

Should they be represented on the board? How else may they be involved?

Different stakeholders may be involved in promoting health and wellbeing at different levels ...



# Different levels of working



# Three possible routes for joint working and commissioning

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## 1. Joint Structures

- Health & Wellbeing Board
- Commissioning functions – joint or integrated teams

## 2. Shared Strategies

- eg Joint Health & Wellbeing Strategy
- Specific populations
- Virtual teams – projects

## 3. Pooled Budgets

- Agreed principles
- Referral, assessment and/or placement processes
- Joint protocol

The first two the HWB is set up and mandated to do.

What about pooled budgets and resources?

Have there been any discussions around those?

## Advantages of joint working



- **Sharing information.**
- **Maximising access to services.**
- **Avoid multiple interventions.**
- **Shared approach to review.**
- **Reflects one borough approach.**
- **Other reasons?**

How can the board promote joint working?

## What helps?

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- **A strong planning process - with plans that are clearly linked through a golden thread.**
- **A clear decision making process within and across partners.**
- **A mutually adopted approach to commissioning. e.g. A Commissioning Framework**
- **Development of local commissioning principles.**
- **Clarity of roles and responsibilities.**



# This is one of six modules available to you. The other modules are...

## A. Introduction to HWBs for ward councillors

- Understanding key tasks of the health and wellbeing board, including the role of Healthwatch.
- Influencing the Health and Wellbeing Board

## B. Role of the Councillor on the HWB

- Understanding the different role and responsibilities of people on the HWB
- Building relationships with other stakeholders
- Exploring opportunities for joint working

## C. Leading and Chairing the HWB

- Agenda setting and planning when dealing with a diverse range of organisations
- Developing a workplan for the Board

## D. Focussing on HWB priorities in your area

- Understanding the Health & Wellbeing needs in your borough and the priorities set by the Board
- Exploring the key themes in delivering preventative services that reduce demand
- Ensuring the best use of resources in delivering services

## E. Managing relationships and responding to crises

- Exploring emerging agendas, and potential crisis points
- Approaches for responding to emerging agendas and crises
- Fostering good working relationships
- Developing collaborate working as Health & Wellbeing advocates

## F. Working with health

- Understanding the health contribution and governance
- Understanding the context and responsibilities of CCGs, LHIB, and NHS Commissioning Boards
- Overview of NHS budgets, and exploring what areas can be influenced