

Shadow Health and Wellbeing Board - York

Draft Constitution

1. Name

- 1.1 The Board will be known as the York Shadow Health and Wellbeing Board (“the Board”) until such time it fulfils its statutory duty to become the York Health and Wellbeing Board.

2. Membership

- 2.1 Board members will be required to represent their organisation with sufficient seniority and influence for decision making. The Membership of the Board will consist of:
- a. The Leader of the City of York Council (“the Council”) or a Councillor nominated by him and 2 other elected representatives
 - b. The Chief Executive of NHS North Yorkshire and York or a nominated representative of the board until such time the organisation ceases to have accountability for delivery of health services
 - c. The Chief Executive of City of York Council
 - d. Two representatives of the Vale of York Clinical Commissioning Group
 - e. A representative of York Local Involvement Network until such time HealthWatch is established
 - f. The Director of Public Health
 - g. The Director of Adults, Children and Education
 - h. A representative of York Council for Voluntary Services

- i. A representative of the York Teaching Hospital NHS Foundation Trust
- j. A representative of Leeds Partnerships NHS Foundation Trust
- k. A representative of the Independent Care Group
- l. A representative of the NHS Commissioning Board where the Board is preparing its joint strategic needs assessment or joint health and wellbeing strategy, or where the Board is considering a matter that relates to the exercise or proposed exercise of the commissioning functions of the National Health Service Commissioning Board (*pending statutory status*)
- m. Other members appointed by the Board or the Leader of the Council after consultation with the Board.

3. Legal Status

- 3.1 The Health and Wellbeing Board is a Committee of the Council and will adhere to the Constitution of the Council (*pending statutory status*).

4. Quorum

- 4.1 The Quorum shall be 7 members including as a minimum a representative of the City of York Council and a representative of the Vale of York Clinical Commissioning Group.

5. Chair

- 5.1 The Chair of the Board shall be the Leader of the Council or his or her nominated representative.
- 5.2 The Vice Chair of the Board shall be elected by the Board at its first meeting.
- 5.3 If the Chair is not present at a meeting the meeting shall be chaired by the Vice Chair. In the absence of both the Chair and

Vice Chair the Board shall elect a Chair for the meeting from those members present.

- 5.4 The Chair of the Health and Wellbeing Board will be required to hold a named delegate list for board representatives including deputies.

6. Frequency of Meetings

- 6.1 The Board shall meet no less often than four times a year.

7. Access to Meetings

- 7.1 The public shall have the same right of access to meetings, agendas, reports and background papers as apply to any other meeting of a Committee of the Council.
- 7.2 The public shall have the same rights to address the meeting as apply at meetings of the Cabinet of the Council.

8. Sub Groups

- 8.1 The Board may establish subgroups required to deliver the its agenda and agree their membership and terms of reference.
- 8.2 The Working Groups will report to the Board.
- 8.3 The board may also establish working arrangements with other working groups.

9. Functions of the Board

- 9.1 To advance the health and wellbeing of the patients and residents in York and to address health inequalities by fulfilling its public health duties.
- 9.2 To encourage persons who arrange for the provision of any health or social care services to work in an integrated manner.
- 9.3 To provide such assistance or other support as it thinks appropriate for the purpose of encouraging the making of

arrangements under section 75 of the National Health Service Act 2006 between the Council and NHS bodies in relation to the exercise of NHS functions or health related functions of the Council.

- 9.4 To exercise the functions of a local authority and its partner commissioning consortia under sections 116 and 116A of the Local Government and Public Involvement in Health Act 2007 relating to joint strategic needs assessments, and health and wellbeing strategy *(pending statutory status)*.
- 9.5 To exercise any other functions of the Council which the Council has determined should be exercised by the Board on its behalf *(pending statutory status)*.
- 9.6 Where it considers it appropriate to do so, or when so requested by the Council, to give the Council its opinion on whether the Council is discharging its duty under section 116B of the 2007 Act to have regard to the joint strategic needs assessment and joint health and well being strategy *(pending statutory status)*.
- 9.7 To oversee the development of local commissioning plans and, where necessary, to initiate discussions with the NHS Commissioning Board if an agreed concern exists.
- 9.8 To lead cultural and behavioural change to support a joint approach to meeting local need.
- 9.9 To hold all partners to account for their role in the delivery of joint commissioning and overall stewardship of the health and wellbeing outcomes for patients and residents.
- 9.10 To work alongside local strategic partnership arrangements to ensure the coordination of city wide ambitions, all of which impact on the health and wellbeing of patients and residents.

9.11 To periodically review the York Health and Wellbeing Board constitution.

10. Conduct

10.1 The Board and its members will commit to respecting the principles of Standards in Public Life promulgated by the Nolan Committee.

10.2 The Board will declare interests at meetings in accordance with the rules applicable to Councillors declaring interests at meetings of the Council. No member will have a prejudicial interest in a matter as a result purely of the matter affecting the sector that they represent.

10.3 Board members will recognise their role as trustees of health and wellbeing and will act collectively in the best interests of the local population.