Health and Wellbeing Board

Current Roles and Functions

- 11A.4 The Committee shall have the following roles and functions:
- To provide democratic accountability for the use of public resources to improve health and wellbeing and reduce health and social inequalities.
- 11A4.2 To promote integration in the commissioning and provision of health and social care services across the district.
- To engage with Commissioners in the development and overseeing of local commissioning plans and priorities.
- To oversee the production and approval of the Joint Strategic Needs Assessment and the Pharmaceutical Needs Assessment.
- 11A4.5 To oversee the production and approval of the joint health and wellbeing strategy.
- To provide collective system leadership and a local interface for both planning and governance through engagement with the NHS Commissioning Board, Public Health England, Local Partnerships and providers, including the voluntary community and faith sector and to undertake all statutory duties.
- 11A4.7 To receive reports from the Integration and Change Board.

Revised Roles and Functions

- To provide local democratic accountability for the use of public resources to improve health and wellbeing and reduce health and social inequalities
- 11A4.2 To promote integration in the commissioning and provision of health and social care services across the District.
- To oversee and be assured that joint commissioning arrangements are in place for health and social care through the Bradford Health and Care Commissioners, and that joint commissioning responsibilities are being effectively discharged to address needs and reduce inequalities.
- 11A.4 To oversee the production of the Joint Strategic Needs Assessment and the Pharmaceutical Needs Assessment
- 11A.5 To oversee the production of the Joint Health and Wellbeing Strategy
- To provide system leadership and a local interface for both planning and governance through engagement with the NHS Commissioning Board, Public Health England, Local Partnerships and providers, including the Voluntary, Community and Faith Sector, and to undertake all statutory duties.
- To hold health and social care system leaders to account through the Integration and Change Board to ensure the Sustainability and Transformation Plans for Bradford and Craven (formerly the Five Year Forward View for Bradford and Craven) and West Yorkshire (as it relates to Bradford District) are delivered.

Current Composition

- 11A.2 The Health and Wellbeing Board shall comprise of the following:
 - a) The Leader of the Council
 - b) The Elected Member portfolio holder for Children and Young People's Service.
 - c) The Elected Member portfolio holder for Adult Services and Health.
 - d) One opposition Elected Member.
 - e) The Accountable Officer from each of the local Clinical Commissioning Group across the District and a clinician from the CCG if the Accountable Officer is not a clinician.
 - f) The Chief Executive of the Council
 - g) The NHS Area Commissioning Team Director.
 - h) One member from the major NHS providers (Airedale NHS Foundation Trust, Bradford Teaching Hospitals Foundation Trust or Bradford District Care Trust).
 - i) The Director of Public Health.
 - j) The Strategic Director of Adult and Community Services.
 - k) The Strategic Director of Children's Services.
 - I) One Member from Healthwatch Bradford and District.
 - m) One Member from the voluntary, community and faith sector elected through the Bradford Assembly.

Revised Composition

- 11A.2 The Health and Wellbeing Board shall comprise of the following:
 - a) The Leader of the Council
 - b) The Chief Executive of the Council
 - c) The Elected Member portfolio holder for Health and Wellbeing
 - d) One opposition Elected Member
 - e) The Accountable Officer for the District's Clinical Commissioning Groups and a clinician from each CCG if the Accountable Officer is not a clinician
 - f) The NHS Area Team Director
 - g) The Director of Public Health
 - h) The Strategic Director of Health and Wellbeing.
 - i) The Strategic Director of Children's Services.
 - j) One member from Bradford HealthWatch
 - k) One member from the Voluntary, Community and Faith Sector, elected through Bradford Assembly.
 - One full and two co-opted representatives of the three main NHS providers.
 - m) One co-opted representative of the Community Interest Companies (representing primary care).
- 11A2.1 The Board may co-opt further members, as required, from provider organisations.
- 11A2.3 Named alternates can be provided for the members of the Health and Wellbeing Board except the representatives of the Clinical

Commissioning Groups who are able to ask any clinician on the CCGs to alternate for them.

The co-opted representatives indicated are non-voting unless the Council decides otherwise.

- 11A2.4 The Board shall report to the Bradford District Partnership as required.
- 11A2.5 Sub-groups that report directly to the Board shall include the Bradford Health and Care Commissioners and the Integration and Change Board.