**Health and wellbeing boards (HWBs) explained**

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Health and wellbeing boards were established under the Health and Social Care Act 2012 to act as a forum in which key leaders from the local health and care system could work together to improve the health and wellbeing of their local population. They became fully operational on 1 April 2013 in all 152 local authorities with adult social care and public heath responsibilities.

Here we focus on the role that health and wellbeing boards could play in emerging policy developments such as integrated commissioning and place-based systems of care.

**What are health and wellbeing boards?**

Health and wellbeing boards are a formal committee of the local authority charged with promoting greater integration and partnership between bodies from the NHS, public health and local government. They have a statutory duty, with clinical commissioning groups (CCGs), to produce a joint strategic needs assessment and a joint health and wellbeing strategy for their local population.

The boards have very limited formal powers. They are constituted as a partnership forum rather than an executive decision-making body.

In most cases, health and wellbeing boards are chaired by a senior local authority elected member. The board must include a representative of each relevant CCG and local Healthwatch, as well as local authority representatives. The local authority has considerable discretion in appointing additional board members. Most have chosen not to invite providers to become formal members, though many engage with providers in other ways.

**Why are health and wellbeing boards relevant to the NHS?**

There is general agreement about the value of boards in bringing together major local partners around the table. Organisational structures and roles have become more complex as a result of the Health and Social Care Act, and the need for local authorities to work closely with their local NHS partners on a range of issues – from population health to hospital discharge – has never been greater. The boards have taken on new responsibilities that directly affect the NHS, for example signing off local Better Care Fund plans.

**Will health and wellbeing boards deliver benefits for local populations?**

This depends on whether boards could play a bigger role in shaping the future of their local services through a more [strategic and integrated approach to commissioning](https://www.kingsfund.org.uk/publications/options-integrated-commissioning) that makes better use of squeezed budgets, achieves better outcomes for individuals, and improves their experience of an otherwise fragmented system.

Some boards are taking on a bigger role:

* Southampton’s health and wellbeing board is considering how to develop a single, integrated commissioning function for health and wellbeing with the board as a single accountable body.
* As part of the London Health Devolution Agreement, Hackney’s health and wellbeing board is leading a pilot programme to protect and transform local services.
* Dorset’s health and wellbeing board, with Bournemouth and Poole, has shared accountability for a single joint commissioning board for health and social care across the three local authority areas.
* The Isle of Wight’s board is overseeing the integration of health and social care based on a ‘one island’ budget.
* In Sheffield the board has supported the creation of an integrated commissioning programme with a single city-wide budget.

**Next steps for integrated commissioning**

Options for integrated commissioning include:

* reaching agreements under Section 75 of the NHS Act 2007 to establish lead commissioning, with either the local authority or (as in North East Lincolnshire) the CCG taking responsibility
* joint commissioning (shared by the local authority and the CCG, as in the examples above)
* a pooled budget.

However, boards do not have powers to take on a full range of commissioning functions, though some could be achieved by, for example, designating the board as a joint committee of the local authority cabinet and CCG governing body and/or by considering the delegation of specific functions to the board. The Cities and Local Government Devolution Act 2016 allows for some NHS functions to be transferred to local authorities.

If the aim is to give boards a bigger role in integrated commissioning, it may be necessary to clarify and strengthen the formal powers of boards so they have a clear legal framework in which they can make executive decisions without the need for complex formal arrangements. An example of this is Scotland, where the government has legislated to create [integration joint boards](http://www.gov.scot/Topics/Health/Policy/Adult-Health-SocialCare-Integration) that are legal entities in their own right.