

RCN fact sheet: Health and wellbeing boards September 2012

Introduction

The Health and Social Care Act 2012 radically reforms the NHS and health care landscape in England. It includes the overhaul of commissioning and the creation of a number of new types of organisation, which are forming across the country ready to take control in April 2013.

This briefing will outline what we know so far about one of the bodies – hea

be met by the local authority, a CCG or the NHS CB. This includes mental health, health protection and prevention, as well as wider social, economic and environmental factors that impact on health and wellbeing. JSNAs were a responsibility of local authorities implemented under the Local Government and Public Involvement in Health Act 2007, which LSPs previously carried out. JSNAs draw from a range of quantitative and qualitative evidence to assess local needs, and consider the needs of the whole community as well as inequalities and needs in disadvantaged areas or from vulnerable groups.

In addition, health and wellbeing boards will be charged with developing newly established **Joint Health and Wellbeing Strategies (JHWSs)**, which make recommendations about how the needs identified in JSNAs could be met.

The commissioning of services by local authorities, CCGs and the NHS CB must have regard to JSNAs and JHWSs. CCGs must also involve health and wellbeing boards when preparing commissioning plans and consult with them on whether their plans take sufficient account of JHWSs. If a health and wellbeing board does not believe a CCG has taken proper account of the JHWSs it can raise its concerns to the CCG and NHS CB. CCGs must be able to explain why commissioning decisions diverge from the strategy, and ultimately the NHS CB can take action if it believes there are no good reasons why the commissioning plans deviate from the JHWS.

Key challenges:

- x **Organisational divisions and territorialism** may persist with regards to decision-making, and priority and budget-setting. These systemic and cultural tensions have existed for decades, and are likely to continue to be difficult to overcome, particularly in the current economic climate.*
- x **Real power and influence?** Whilst their statutory existence is an important*

*boards are not clear about their role in relation to acute service provision.
Organisational territorialism may persist therefore.*

x *Evaluating their success and impact* –

The RCN is responding to the current consultation on the draft guidance of JSNAs and JHSWs: <http://www.dh.gov.uk/health/2012/07/consultation-jsna/>. If you have any views or comments on this consultation please email laura.clarke@rcn.org.uk by the 14th September.