

Worcestershire Health and Wellbeing Board (the Board) Terms of Reference

Legal standing

1. The Board is constituted as a Committee of the County Council. The Health and Social Care Act 2012 includes a clause that provides for the disapplication of legislation that relates to such Committees in order to recognise that Health and Wellbeing Boards are unusual in comparison to other Section 102 Committees in having officers, and members from Clinical Commissioning Groups and local Healthwatch.
2. The Board does not have delegated authority to take decisions of behalf of member organisations. However, all organisations are encouraged to abide by the collective decisions of the Board. In the event of a dispute the Board:
 - will attempt resolution locally
 - may engage external mediation
 - may escalate the issue to NHS England
 - may refer the issue to the Secretary of State.

Purpose

3. The Board is a system leadership partnership, bringing together the organisations responsible for improving health and wellbeing and reducing health inequalities across Worcestershire.

Aims

4. The Board will:
 - Work collectively to improve the health and wellbeing of the local population, with a focus on reducing inequalities
 - Support integrated place-based working, ensuring system leaders work collectively with, and on behalf of, the local population to reflect their needs
 - Establish a shared understanding of health and wellbeing in Worcestershire and the County's health and social care needs
 - Ensure that there is long-term action across a range of partners, embracing the whole life course, focussing on prevention and influencing the determinants of health and wellbeing
 - Ensure continuous improvement in health and wellbeing outcomes, quality and value for money of health, social care and related children's services
 - Lead strategic planning and drive commissioning of NHS, public health, social care and related children's services
 - Influence how partners use their resources to organise and provide services and to support the strategic plans of the Integrated Care System
 - Ensure effective arrangements are in place to protect the public against infectious diseases and other threats to health through preventive efforts, robust planning and an effective response to outbreaks and incidents

Approach

- Support the work of the Adults Safeguarding Board and Children's Safeguarding Partnership to ensure that effective arrangements are in place for safeguarding adults and children
- Become a forum for public discussion and accountability of strategies, policies, services and activities that influence health and wellbeing and health, and social care services.
- Develop a co-operative approach around major service and system change.

5. To do this the Board will:

- Prepare and produce a Joint Strategic Needs Assessment (JSNA) to provide a clear statement of health and wellbeing in Worcestershire, and the County's health and social care-related needs
- Share the JSNA with the Integrated Care Partnership to inform the Integrated Care Strategy, in accordance with the Local Government Agency guidance appended to the Health and Care Bill 2022
- Develop a joint local Health and Wellbeing Strategy; based on the JSNA assessment and in response to the Integrated Care Strategy, to provide a framework for how these needs are to be addressed
- Develop a clear understanding of current and future funding, activity and expenditure across health and social care, and opportunities for service change
- Promote integration between commissioners of NHS, public health, and social care services for the advancement of the health and wellbeing of the local population. Providing advice, assistance, or other support in order to encourage partnership arrangements such as developing of agreements to pool budgets or make lead commissioning arrangements under section 75 of the NHS Act.

Membership

6. The Chairman and Vice Chairman of the Board will be appointed by the Leader of the County Council from amongst voting members. Voting members are required to fully represent the views of their organisation; even if this results in them abstaining from voting.

Organisations with voting rights will be:

County Council: (6)

- **Cabinet member for Health and Wellbeing***
- **Cabinet member for Adult Social Care***
- **Cabinet member for Children and Families***
- Director of Adult Services (People)
- Director of Children's Services
- Director of Public Health

Sub-groups and other relationships

NHS: (6)

- **Accountable Officer from the Integrated Care Board (ICB)***
- **ICB Non-Executive Director for Health Inequalities ***
- **ICB Executive Director of Strategy, System Development and Integration***
- Primary Care Network (PCN) Clinical Director representative
- Worcestershire Acute Hospitals NHS Trust Representative
- Herefordshire and Worcestershire Health and Care NHS Trust Representative

Wider representation: (6)

- **Healthwatch Worcestershire Board member***
- Member or Chief Executive representative appointed by each District Council
- Local Enterprise Partnership (LEP) representative
- Voluntary Community and Social Enterprise (VCSE) Alliance Board representative
- West Mercia Police representative
- Chairman of the Worcestershire Strategic Housing Partnership (to represent local housing authorities)

7. Voting members are denoted above (*).

8. Additional representatives from the County Council, ICB and other organisations may be invited to attend at the discretion of the Chairman but may not vote.

9. All members (whether voting or not) will be required to provide a named substitute of relevant seniority to take their place if they are unable to attend a meeting.

10. The Board will maintain a number of sub-groups to lead on one or more of the aims above, chaired by a member of the Board and reporting to it bi-annually. They are not formal committees or sub-committees of the Council and will not meet in public. An outline of their roles and membership is included in the attached **Appendix A**.

- JSNA Working Group
- Being Well in Worcestershire Strategic Group
- Health Protection Group
- Children and Young People's Strategic Partnership

11. The Board may form time limited working groups to complete focused actions where relevant. They are not formal committees or sub-committees of the Council and will not meet in public. They should report on progress to the Board or an appropriate sub-group.

Decision-making and quorum

12. The Board will maintain a dialogue and receive reports, enabling it to formally comment and contribute to key strategies and activities, from key groups across the Integrated Care System. These include the:

- Integrated Care Partnership Assembly
- Worcestershire Executive Committee
- Integrated Commissioning Executive Officer's Group (ICEOG)
- Worcestershire Safer Communities Board
- Worcestershire Strategic Housing Partnership
- Worcestershire Safeguarding Adults' Board
- Worcestershire Safeguarding Children's Partnership.

Public participation

13. Decisions of the Board will be made by consensus wherever possible. If a consensus cannot be reached the Chairman will call for a vote from amongst those voting members present at the time. The Chairperson will have a second or casting vote in the case of equality of votes.

14. Meetings will be quorate if at least six voting members (or their substitutes) are present including at least one elected Member from the County Council and one ICB member.

15. Formal Board meetings will be held in public except where the Board is required to consider items of a confidential or exempt nature in which case the press and public may be excluded from that part of the meeting. The Access to Information Rules will apply to all formal meetings of the Board. Board development sessions are not formal meetings of the Board and will be held in private.

16. Up to 20 minutes of each meeting will be given over to public participation in the form of questions or comment up to a maximum of three minutes per participant. Questions or comments will normally be limited to items relevant to the agenda except at the discretion of the Chairman. The nature and content of participation should be submitted by 9.00am the working day before the meeting date to the Head of Legal and Democratic Services. Questions or comments will be heard but will not be followed by a debate. The Chairman will follow up with a written response within 28 days.

Declarations of Interest and Code of Conduct

17. All voting members of the Board and substitutes are required to register their Disclosable Pecuniary Interests as required under the Localism Act 2011 and the Council's Code of Conduct.

18. Members of the Board are expected to:

- Attend meetings or send a substitute
- Work collaboratively in pursuit of the aims of the Board, and take collective responsibility for decisions made

**Frequency
of meetings
and support**

- Ensure that their own contribution and the business of the Board is conducted in a way which is consistent with the Nolan Principles of Public Life: selflessness, integrity, objectivity, accountability, openness, honesty and leadership
- Come with a mandate to represent and feedback to their respective organisation(s)
- Honour any commitments made insofar as they relate to their own organisation(s)
- Balance the interests of the population of the County as a whole against the interests of specific geographical areas.

19. Meetings of the Board will generally be held quarterly with additional meetings to be arranged at the discretion of the Chairman.

20. The Board will also hold private sessions to support its own development.

21. Administration for the Board will be provided by the County Council's Assistant Director for Legal and Governance.