

Health & Wellbeing Board Terms of Reference

The Health and Wellbeing Board will focus on the determinants of a good quality of life, to improve the health and wellbeing of Rochdale residents, and as a way of reducing inequalities. The Health and Wellbeing Board will encourage joined up, integrated and system wide working to improve outcomes for local people and ensure that strategy is informed by intelligence and evidence.

The Health and Wellbeing Board's ambition is to enable communities to live healthy lives and to close the gap between communities that are doing well and those that need help. We will listen together, deliberate together and make decisions together to overcome barriers and improve opportunities for everyone to support and sustain a good quality life.

1. Accountable to

The Health & Wellbeing Board will be accountable to Full Council in its capacity as a Board of the local authority and will be subject to overview and scrutiny via the Health, Schools and Care Overview and Scrutiny Committee.

2. Accountable for

The Health Wellbeing Board can establish subcommittees to enact any of its functions.

Currently there is one sub-committees - the Integrated Commissioning Board.

Approval of the S75 Agreement in respect of the Better Care Fund, and implementation and monitoring of the Fund is delegated to the Integrated Commissioning Board.

3. Background

The Health & Wellbeing Board was previously known as the Strategic Partnership Board, which merged Rochdale Health and Wellbeing Board and Rochdale Borough Public Service Reform (PSR) Steering Group together. With the formulation of Integrated Care Systems (ICS) it has been agreed that the Health & Wellbeing Board will be reinstated to ensure we have a focus on improving outcomes, reducing inequalities, and embedding a population health approach.

4. Statutory Responsibilities, Role and Purpose

The purpose of the Health and Wellbeing Board is to –

- 1) Ensure intelligence and evidence, including the comprehensive and inclusive voices of residents and service users, is used to provide shared insight and a holistic understanding of the health and wellbeing needs of the local population
- 2) Set the overarching strategic direction for the borough in relation to improving health and wellbeing
- 3) Ensure that strategy and service delivery, in relation to the health and wellbeing of residents, is informed by intelligence, and is aligned to the agreed strategic direction

This will be achieved via the development and utilisation of the Joint Strategic Needs Assessment, the Joint Health and Wellbeing Strategy, and through the development of a work programme that reviews key programmes of work, to ensure that they are delivered in accordance to identified priorities and aligned to agreed strategy.

The Health & Wellbeing Board will -

1. Carry out the statutory duties relating to Health and Wellbeing Board as set out in the Health and Social Care Act 2012. These are:
 - The preparation of Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs), on behalf of the local authority and CCG's;
 - The duty to encourage integrated working between health and social care commissioners, including providing advice, assistance or other support to encourage arrangements under Section 75 of the National Health Service Act 2006 (lead commissioning, pooled budgets and integrated provision) in connection with the provision of health and social care services;
 - Power to encourage close working between commissioners of health related services and the Board
 - A power to encourage close working between commissioners of health related services and commissioners of health and social care services;
 - Any other functions that may be delegated by the Council under Section 196(2) of the Health and Social Care Act 2012
2. Lead an assessment of the health and wellbeing needs of the local population and produce a high-level Joint Strategic Needs Assessment.
3. Ensure that engagement with communities is, comprehensive and inclusive, meaningful, informs decision-making and service delivery, and always endeavours to include marginalised groups and individuals.
4. Develop a Joint Health and Wellbeing Strategy, which identifies shared outcomes and priorities for action.

5. Work to embed the Joint Health and Wellbeing Strategy, including the Prevention Strategy and use of the Building Blocks to Recovery, to maximise the chances of health gain at every opportunity.
6. Shift the focus of services from crisis management to a preventative approach at key points in the whole life course of the service.
7. Ensure all partners are working towards the shared outcomes and priorities for action. The Health and Wellbeing Board will use robust ways of working to measure progress and success.
8. Act as a critical friend to challenge all partners to;
 - Fully deliver their contribution to the Borough's Joint Health and Wellbeing Strategy
 - Deliver against agreed shared outcomes, priorities and address inequalities
 - Work in accordance with and adhere to the principles and system characteristics adopted by the Rochdale system
 - Embed the quadruple aim
 - Improved Population Health & Wellbeing
 - Better quality and more accessible health and social care services
 - Higher value health and social care
 - A motivated and sustainable health and social care workforce
9. Provide public accountability for services that are directly related to the health and wellbeing of the local population.

5. Operating Principles

The Health and Wellbeing Board will have the following operating principles:

- Shared leadership of a strategic approach to the health and wellbeing of communities that reaches across all relevant organisations.
- A commitment to driving real action and change to improve services and outcomes.
- Parity between Board Members in terms of their opportunity to contribute to the board's deliberations, strategies and activities.
- Shared ownership of the Board by all its members (with commitment from their nominating organisations) and accountability to the communities it serves.
- Openness and transparency in the way that the board carries out its work.
- Inclusiveness in the way it engages with patients, service users and the public.
- To reduce health inequalities.
- To promote prevention and early help.

6. Code of conduct and member responsibilities

All Members of the Health and Wellbeing Board are required to comply with Rochdale Borough Council's Code of Conduct, including submitting a Register of Interests.

In addition, all Members of the Health and Wellbeing Board will commit to the following roles, responsibilities and expectations:

- They make every effort to attend meetings. Substitutes can be sent. Failure to attend three consecutive meetings will lead to a review of their membership.
- Members endorse the collaborative model and work to ensure its achievement.
- They are prepared for the meetings, and have read papers circulated in advance.
- They will represent the views of the group, organisation, and / or partnership that they speak for and they will ensure that Health and Wellbeing Board business is reported back to that group, organisation / partnership as required.
- They will be able and willing to make decisions on behalf of the body/ organisation/partnership that they speak for; this must also apply when substitutes are sent.
- They will take forward any actions that they have agreed to develop, and then report back any progress to the group in the timescales agreed.
- Members will adhere to the seven principles of public life.

7. Membership and Membership operation

As the Board will undertake Health and Wellbeing functions, certain members of the Board are prescribed. In the interests of inclusivity and shared ownership, the Council has the ability to extend its membership to include representatives who can support the work of the Board. All Members of the Board have equal voting rights. The Membership of the Health and Wellbeing Board shall be X (need to tally this once membership is confirmed) voting Members.

Membership must include the following voting members:

- Portfolio Holder with responsibility for Health/Public Health
- Portfolio Holder with responsibility for Children's Services
- Portfolio Holder with responsibility for Adult Care
- Portfolio Holder with responsibility for Finance
- Leader of the Conservative Group
- Director of Adult Social Services for the local authority
- Director of Children's Services for the local authority
- Director of Public Health for the local authority
- A representative of the local Healthwatch for the Borough

- A representative of the Clinical Commissioning Group

Substitutes

Substitutes from each of the partner organisations will be permitted; however, membership should be reviewed if a named Board member does not attend for three consecutive meetings.

Attending Health and Wellbeing Board advisors

- Chief Officer of the LCO
- Action Together
- Chief Executive Rochdale Borough Council
- Director of Neighbourhoods
- Rochdale Borough Council Monitoring Officer

Others will be invited as appropriate.

7. Quorum

Quorum shall be a third of the voting Membership rounded up, or five voting members, whichever is greatest. At least one Elected Member must be present in order for the meeting to be declared quorate. Where a meeting is inquorate those Members in attendance may meet informally but any decisions shall require appropriate ratification at the next quorate meeting of the Health and Wellbeing Board in order for decisions to be legal/ legally binding.

8. Chair

The Chair will be appointed by Council at the annual Council meeting.

If the Chair or Vice-Chair are not in attendance then a Chair will be appointed from the floor of those voting Members present.

The Chair will ensure:

- Meetings are conducted in a fair and transparent business-like fashion.
- Decisions are clear and organisations are accountable.
- Any actions required have a clearly identified lead person to take forward the action, and timescale.
- That a shared culture and language, common purpose and trust are endorsed through a collaborative leadership style.

9. Vice-Chair

The Vice-Chair will be appointed on an annual basis at the first meeting of the municipal year, and will be elected from the Health and Wellbeing Board voting Membership.

10. Voting

Decision making will be taken where possible on a collaborative basis, but each Member of the Board will have one vote. The Chair at their discretion can choose to withhold their vote, but in the event of a split decision, will have the casting vote.

11. Meetings of the Health and Wellbeing Board

Formal meetings of the Health and Wellbeing Board will be held in public and shall be held on a bi-monthly basis. If the business to be considered involves confidential or exempt business, the Health and Wellbeing Board can resolve to exclude the public during consideration of that business.