

## **Appendix 3a**

### **Health & Wellbeing Together Board – proposed amended version**

#### **Health & Wellbeing Together**

##### **Terms of Reference: Health and Wellbeing Together Broad**

Health and Wellbeing Together is the forum where key leaders from the health and care system come together to improve the health and wellbeing of the local community, work towards reducing health inequalities and support the development of improved and joined up health and social care services. It is the name given to the City of Wolverhampton Health and Wellbeing Board, a statutory Board established under the Health and Social Care Act 2012.

##### **Our working principles:**

- Provide strong local leadership based on evidence, focusing on those areas where the Board can make the biggest difference to health and well-being.
- Encourage integrated working, promoting an ethos of integration and partnership in the planning, commissioning, and delivery of services.
- Demonstrate transparent decision making so that local people can understand the decisions being taken and the rationale behind them.
- Involve local people in decision making by enabling residents to have their say through community engagement and co-production opportunities.
- Work in partnership to identify shared priorities and appropriately coordinate activity, informed by a commitment to a place-based approach to health.
- Take action to tackle health inequalities using a consistent approach across partners with a firm view that health inequalities are not inevitable.
- Act with courage and conviction seizing the opportunities presented by being part of the Black Country Integrated Care System to work in new and innovative ways in the long-term interests of the whole population of Wolverhampton.

##### **Our responsibilities:**

- Assess the health and wellbeing needs of the population and publish a joint strategic needs assessment (JSNA) utilising a shared approach at place to turning data into actionable intelligence.
- Publish a joint local health and wellbeing strategy (JLHWS), which sets out the priorities for improving the health and wellbeing of the local population and how identified needs in the JSNA and other needs assessments will be addressed, including reducing health inequalities.
- Promote the integration of health and social care services through the coordination of joint commissioning to meet local need in line with section 75 of the National Health Service Act 2006.
- Coordinate and lead action at place level working effectively with the OneWolverhampton place-based partnership, with OneWolverhampton acting as a delivery vehicle for driving forward shared priorities.

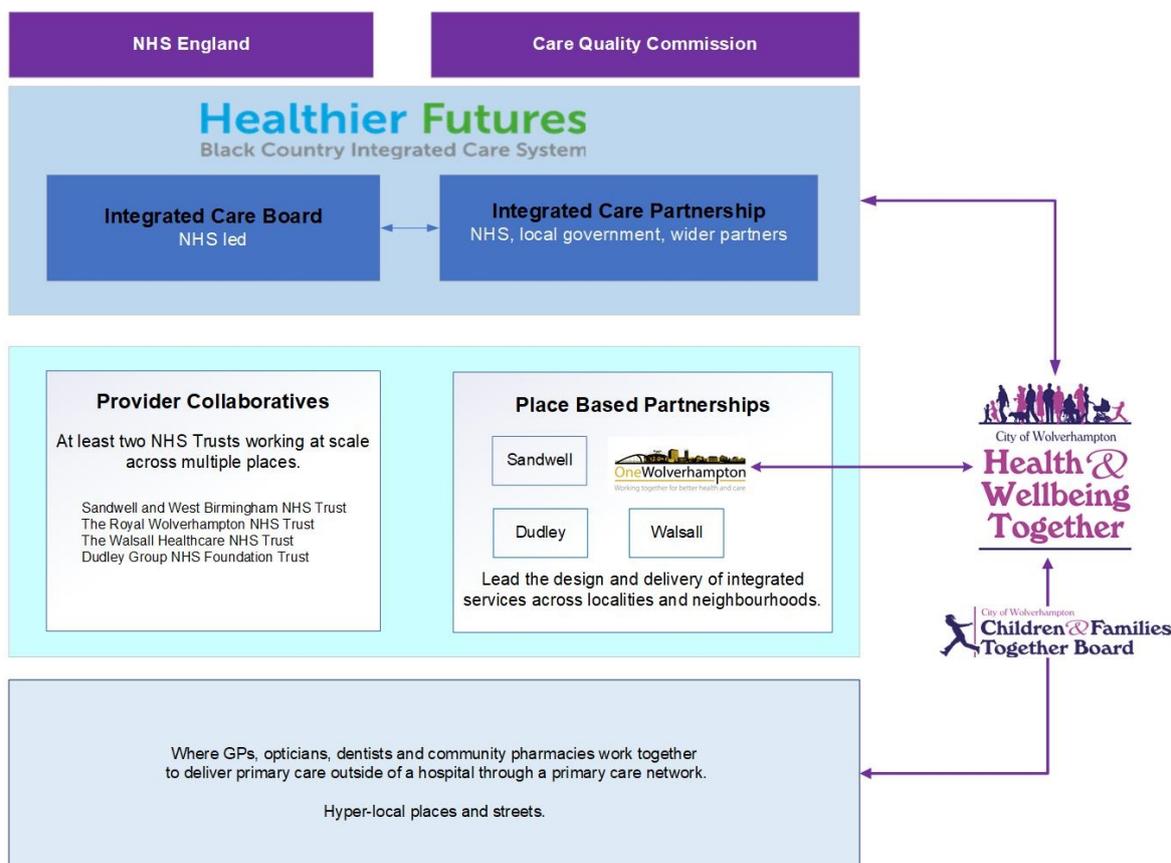
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- Work collaboratively and iteratively with the Integrated Care Partnership, including being an active participant in the development of the Black Country Integrated Care Strategy and taking this into account when preparing local health and wellbeing strategies.
- Receive and feedback on all relevant documentation from the Black Country Integrated Care Board, for example the rolling five-year joint forward plan and annual report, ensuring proper account is taken of Wolverhampton’s JLHWS.
- Receive the Black Country Integrated Care Board and partner NHS trusts joint capital resource use plan and any revisions for comment.
- Prepare a Pharmaceutical Needs Assessment (PNA) to ensure pharmaceutical services in Wolverhampton meet local needs.
- Ensure the work of Health and Wellbeing Together is aligned with policy developments and strategic aims locally, regionally and nationally, including the Black Country Integrated Care System.
- Have strategic oversight of the Public Mental Health Strategy and Suicide Prevention Strategy for Wolverhampton.

A Health and Wellbeing Together member role description is available upon request..

**Health and Wellbeing Together governance and reporting relationships**



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- The Black Country Integrated Care Systems is a statutory body comprised of an Integrated Care Board and an Integrated Care Partnership.
- OneWolverhampton is our local place-based partnership enabling partners to meaningfully collaborate between health care services to deliver improvements in health and care outcomes for citizens.
- The Children and Families Together Board is responsible for strategic planning of services for children and young people in the city. It reports into Health and Wellbeing Together on shared priorities and key performance indicators in relation to children, young people and families.
- Local people's voices and lived experience should help inform priorities at every level.

In addition to the above, Health and Wellbeing Together is committed to working collaboratively with the Safer Wolverhampton Partnership and Wolverhampton Safeguarding Together, to remove duplication, ensure consistency of approach on cross cutting themes and achieve greater impact across the whole system.

### **Health and Wellbeing Together membership**

In line with the Health and Social Care Act 2012 membership of the Health and Wellbeing Together Board will consist of:

- at least one councillor of the local authority
- the director of adult social services for the local authority,
- the director of children's services for the local authority,
- the director of public health for the local authority,
- a representative of the Local Healthwatch organisation for the area of the local authority,
- a representative of each relevant clinical commissioning group (now replaced by the Integrated Care Board for place)
- such other persons, or representatives of such other persons, as the local authority thinks appropriate.

Health and Wellbeing Together is comprised of a Full Board and an Executive. Full Board meetings are structured to shift focus from service silos to system outcomes by adopting a thematic approach to addressing the priorities identified in the Local Joint Health and Wellbeing Strategy. Additional stakeholders may therefore be invited to attend specific meetings at the discretion of the Board.

The primary focus of the Executive group is to sign off statutory documents and provide a strategic forum for the Council and health partners to drive health and social care integration.

Members may allocate a named substitute to attend on their behalf by notifying the Chair of the Board and Democratic Services in advance of the meeting.

<b>Agency</b>	<b>Role</b>
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City of Wolverhampton Council	Leader of the Council+
	Cabinet Member for Adults and Wellbeing+
	Cabinet Member for Children, Young People and Education
	Opposition representative
	Executive Director of Families+
	Director of Adult Services+
	Director of Public Health+
	Head of Communities, Public Health
Integrated Care Board	Wolverhampton Managing Director+
OneWolverhampton	Partnership Director+
Royal Wolverhampton NHS Trust	Chief Executive+
Black Country Healthcare NHS Foundation Trust	Chief Executive+
Wolverhampton Healthwatch	Designated representative
Wolverhampton University	Designated representative
West Midlands Police	Designated representative
West Midlands Fire Service	Designated representative
Wolverhampton VCSE Alliance	Designated representative
Wolverhampton Voluntary Community Action	Chief Executive
Wolverhampton Safeguarding Together	Chair
Better Homes Board	Deputy Director of City Housing
<i>Observer status</i>	Chair of Health Scrutiny
	Representative Local Pharmaceutical Committee
	Representative West Midlands Care Association
+ Executive Group member	

The Chair will be appointed by the City of Wolverhampton Council. The Vice-chair will be appointed by the Black Country Integrated Care Board.

Should neither Chair of Vice Chair be able to attend a meeting of Health and Wellbeing

Together, the Chair shall designate another statutory member of the Board as Chair for this meeting. Where this is not possible, a Chair shall be elected at the start of the meeting.

**Health and Wellbeing Together voting and decision-making**

Reports to Health and Wellbeing Together Board meetings should be prepared in a way that enables effective decision making. Decisions, recommendations, declarations of interest and reservations will be recorded in the minutes.

All meeting papers will be published on the Council website at least five clear working days before the meeting concerned.

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There will be sovereignty around decision making processes. Members will be accountable through their own organisation's decision-making processes for the decisions they take. It is expected that members of Health and Wellbeing Together will have delegated authority from their organisations to take decisions within the terms of reference.

Decisions taken by Health and Wellbeing Together are generally done so by consensus. If a Board decision should require a vote, then all members may participate having one vote each; in the event of a tie then the Chair will have the casting vote. Observers do not have a vote.

No business will be conducted that is not on the agenda.

A thematic Forward Plan of activity will be reviewed at each full meeting of Health and Wellbeing Together to ensure agenda items are strategic and timely.

#### **Health and Wellbeing Together frequency of meetings and quorum**

A full meeting of Health and Wellbeing Together will take place four times a year. The Executive will meet approximately six weeks prior to each Full Board meeting.

Full meetings of Health and Together will be conducted in public unless confidential information is to be disclosed. There will be the opportunity for members of the public to ask questions in line with the protocol outlined in the guide to speaking at meetings.

Items that are of a confidential nature will be discussed within the Private section of the agenda (i.e., contains exempt information as defined in Schedule 12A to the Local Government Act 1972).

An extraordinary meeting can be called when the Chair considers this necessary and or/ in the circumstances where the Chair receives a request in writing from 50% of the membership of the whole membership.

An annual informal focus day / session on specific issues of interest will take place and all members will be encouraged to attend.

Agendas and papers for Board meetings will be made publicly available via the website unless covered by exempt information procedures.

The quorum for meetings will be a quarter of the membership, with at least one Elected Member and one external partner in attendance.