Brighton & Hove City Council Shadow Health & Wellbeing Board

April 2012-March 2013

Draft Terms of Reference

1. Introduction

The Shadow Health and Wellbeing Board (SHWB) will act as an advisory body to the Council, the Sussex PCT (SPCT) Board and the emerging Clinical Commissioning Group (CCG).

The SHWB will continue to act in shadow form until the formal constitution of the Health and Wellbeing Board (HWB). It is expected that the Health and Social Care Bill will be enacted to enable the new Board to be established in April 2013, when it will become a committee of the Council.

References in this document to the 'Board' are references to the SHWB. These terms of reference will be reviewed prior to the establishment of the Statutory Board.

2. Purpose

The SHWB will lead and advise on work to improve the health and wellbeing of the population of Brighton & Hove, through the development of improved and integrated health and social care services.

In support of this aim the Board will advise the Council, the SPCT Board and the CCG in relation to the following matters:-

- 1. Providing city-wide strategic leadership to public health, health and adults and children's social care commissioning, acting as a focal point for determining and agreeing health and wellbeing outcomes and resolving any related conflicts;
- 2. In its shadow year, the SHWB will have regard to the Joint Strategic Needs Assessment (JSNA) for the City. [The HWB will be responsible for preparing and publishing the JSNA once it is a formally established committee under the Health and Social Care Act];
- Preparing and publishing a Joint Health & Wellbeing Strategy (JHWS) a high level strategic plan that identifies, from the JSNA and the national outcomes frameworks, needs and priority outcomes across the local population;
- 4. Receiving the annual CCG commissioning plan for comment. [Once the HWB is a formally established committee under the Health and Social Care Act, it will have the authority to refer the CCG commissioning plan up to the NHS Commissioning Board];
- 5. Supporting joint commissioning and pooled budget arrangements where it is agreed by the Board that this is appropriate;
- 6. Promoting integration and joint working in health and social care across the locality;

- 7. Involving users and the public, including to communicate and explain the JHWS to local organisations and city residents;
- 8. Monitoring the outcomes goals set out in the JHWS and use its authority to ensure that the public health, health and adults and children's commissioning and delivery plans of member organisations accurately reflect the Strategy and are integrated across the city;
- 9. Establishing and maintaining a dialogue with the City Council's Local Strategic Partnership Board, including consulting on its proposed strategies and reporting on outcomes in line with the City's Performance and Risk Management Framework.
- 10. Ensuring robust arrangements are in place for a smooth transition into the Statutory Board by April 2013.

3. Membership

Voting Membership:

- Elected Member from the Largest Political Group (as Chair*)
- Six additional elected Members which, taken together with the Elected Member as Chair set out above, will be allocated to the different groups in proportion to the number of seats they have at Council
- The Director of Children's Services
- The Director of Public Health
- The Director of Adult Social Care
- One lead clinical and one non clinical member from the local Clinical Commissioning Group
- A representative of Healthwatch
- A member from the Youth Council

* The Chair is a fully participating and voting member of the SHWB.

An NHS Commissioning Board (NHSCB) representative will attend, as required, when the NHSCB is established.

A range of partners will be invited to attend the SHWB. This will include the respective chairs of the children's and adults safeguarding boards.

Membership will be reviewed by the SHWB as part of its development of the Statutory Board.

4. Conduct of meetings

- 1. Meetings of the Board will be in public.
- 2. The Access to Information Procedure Rules and the Standing Orders of Brighton & Hove City Council will apply with any necessary modifications, including the following:-
 - The Chair will be an elected member of the Largest Political Group;

- The quorum for a meeting shall be a quarter of the voting membership, including at least one elected member from the Council and one representative of the CCG;
- The aim of the Board is to achieve decision making by consensus. Where this is not possible, decisions shall be made on the basis of a show of hands of a majority of voting members present. If there is an equal number of votes, the Chair will have a second or casting vote;
- The Board shall meet four times within a financial year;
- A Special Meeting will be called when the Chair considers this necessary and/or in the circumstances where the Chair receives a request in writing by 50% of the membership of the Board.

5. Communication and Engagement

The SHWB will communicate and engage with local people in how they can achieve the best possible quality of life and be supported to exercise choice and control over their personal health and wellbeing. In support of this, the Board will:-

- Develop and implement a Communications and Engagement strategy for the work of the Board, including how the work of the Board will be influenced by stakeholders and the public, including seldom heard groups;
- Represent Brighton & Hove in relation to health and wellbeing issues at a local, sub-regional, regional, national and international level, influencing and negotiating on behalf of the members of the Board and working closely with the LINks/local HealthWatch;