

## Slough Shadow Health and Wellbeing Board (Board's name to be agreed)

### Terms of Reference

#### Purpose of the Shadow Health and Wellbeing Board (HWB)

- To act as a high level strategic partnership to agree on the priorities that will improve the health and wellbeing and reduce the inequalities of the residents of Slough.
- To deliver the statutory functions placed on Health and Wellbeing Boards once the Health and Social Care Bill is established in legislation.
- To act as the umbrella partnership for the borough and oversee the implementation of the priorities in the Sustainable Community Strategy.

To do this the **objectives** of the Shadow HWB will be to:

1. Understand the health and wellbeing needs of Slough's population;
2. Provide a strategic overview of health and wellbeing across Slough to ensure that services are focused in the right place, including developing a strategy for how health, public health, social care and children's services can work together to address identified needs;
3. Deliver the Board's duty to promote joint commissioning and integrated provision, by bringing together a wider range of resources across NHS, social care, public health and other related services;
4. Give the public a voice in shaping health and wellbeing services in Slough, and provide a key forum for public accountability of NHS, public health, social care and other commissioned services that are related to health and wellbeing in Slough; and
5. Prepare for the transition to a fully constituted Health and Wellbeing Board which is ready and able to take on the statutory duties and powers and responsibilities that will be set out for it in the Health and Social Care Bill.

#### Main functions and responsibilities

##### *Understanding needs and priorities:*

- Produce the Joint Strategic Needs Assessment (JSNA);

##### *Strategy development:*

- Drawing on the JSNA, agree and produce a new joint Health and Wellbeing Strategy (JHWS) that spans the NHS, public health, social care and tackles other determinants of health such as crime & disorder, housing, climate change, skills and transport. The JHWS will provide a high-level summary of how the health and wellbeing needs of the community are being addressed, which commissioners will need to have regard of in developing commissioning plans for health care, social care and public health;
- Retain a strategic overview of the work of commissioners to further the Board's strategic objectives.

#### *Joint commissioning and integrated provision:*

- Consider the wider determinants of health and wellbeing and link with a range of agencies that can help improve health and wellbeing outcomes for all groups in Slough;
- Promote joined-up working and integrated commissioning plans across the NHS, social care, public health and other related services which may have an impact on the health and wellbeing of individuals (for example housing, transport, skills, climate change);
- Encourage organisations commissioning health or social care service provision (clinical commissioners, adult and children's social care commissioners and public health commissioners and other related services) to work together in a more integrated manner;
- Guide and oversee the establishment of effective joint commissioning arrangements, led by GP Consortia;
- Provide advice to the NHS Commissioning Board in authorising and assuring CCGs;
- Support the development of CCG commissioning plans;
- Promote integrated provision and partnership working, joining up social care, public health and NHS services with wider local authority services;
- Refer commissioning plans back to the Clinical Commissioning Consortium or the NHS Commissioning Board if they are not in line with the JSNA or JHWS;
- Lead on the development of pooled budget arrangements, where relevant.

#### *Public accountability:*

- Involve local people - through councillors and patient representatives - in influencing the strategy for health and well-being in their area;
- Lead the development of HealthWatch forums for public and patient engagement and involvement.

#### *Preparing for transition to fully constituted Health and Wellbeing Board:*

- Make recommendations on the constitution and governance of the Health and Wellbeing Board and any changes required to existing boards and structures in order to implement the proposed changes;
- Deliver a work-plan for the shadow board that that will ensure the necessary relationships, structures and processes for the Health and Wellbeing Board are developed and secured by April 2013;
- Take on any interim new and transferred powers; and responsibilities pending the formal constitution of the Board.

### **Membership**

The Shadow Health and Wellbeing Board will comprise the following but kept under review as requirements are clarified in the legislation and as the Board's priorities are developed and agreed:

- Leader of the Council
- Cabinet member for Health and Wellbeing
- Chief Executive of SBC
- The Directors of:
  - Adult Social Services
  - Children's Services
  - Public Health

- Representative of Slough Clinical Commissioning Group
- Representative from Slough's LiNK, pending establishment of HealthWatch
- Representative of the NHS Berkshire (PCT)
- Local Police Area Commander
- Representative of the Royal Berkshire Fire and Rescue Service
- Representative of local businesses
- Representative of the voluntary and community sector

## **Governance**

In line with the Health and Social Care Bill, the Health and Wellbeing Board will be a committee of the local authority from April 2013. Until that time formal decision-making responsibility will continue to rest with the Council's Executive (the Cabinet and its Members) and the relevant governance bodies of the local health services until new legislation is enacted.

The Shadow HWB will also need to establish a relationship with the Health Scrutiny Panel.

The requirements are as follows, but will be kept under review as requirements are clarified in the legislation:

### *Decision making*

Decisions at meetings will be achieved by consensus of those present. If a vote is required, the Chair will have a casting vote.

### *Quorum*

The quorum for the Board will comprise of one third of its total membership or five members, whichever is the greater. If fewer members attend a meeting than this figure it will be deemed inquorate. Matters may be discussed but no decisions taken.

### *Urgent decisions*

If an urgent decision is required which cannot wait until the next meeting, a special meeting can be arranged. If this is not practical, then the Chair, in discussion with the Vice-Chair, may take a decision. The decision will be reported to the next scheduled meeting.

### *Frequency and timing of meetings*

Meetings will be held bi-monthly, commencing at 5.00 p.m. unless otherwise agreed.

### *Meetings*

Meetings of the Shadow HWB will be held in private.

### *Agendas*

Agendas and associated papers will be circulated five working days before a meeting is held. The HWB will develop a forward plan setting out programmed agenda items for the year ahead.