

## **Rutland Health and Wellbeing Board**

### **Terms of Reference**

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#### **Introduction**

The Health and Wellbeing Board has been appointed by Rutland County Council as a statutory committee of the Local Authority. It will discharge directly the functions conferred on Rutland County Council by Section 196 of the Health and Social Care Act 2012 or such other legislation as may be in force for the time being.

#### **1. Aim**

To achieve better health, wellbeing and social care outcomes for Rutland's whole population and a better quality of care for patients and other people using services.

#### **2. Key Role**

2.1 Provide strategic coordination of commissioning services across NHS, Social Care, Public Health, Children's Services and other services that the board agrees impacts on the wider determinants of health.

2.2 Provide collaborative leadership that influences, shapes and drives a wide range of services and interventions that spans health care, social care and public health.

#### **3. Responsibilities**

3.1 Identify current and future health and wellbeing needs across Rutland through revising the Joint Strategic Needs Assessment (JSNA) as and when required.

3.2 Prepare and publish a Joint Health and Wellbeing Strategy (JHWS) that is evidence based (through the work of the JSNA) and supported by all stakeholders. This will set out our objectives, trajectory for achievement and how we will be jointly held account for delivery.

3.3 Develop solutions to challenges outlined in the JSNA and JHWS.

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3.4 Facilitate partnership working across health and social care to ensure that services are joined up around the needs of service users. Encourage persons who arrange for the provision of health-related services in its area to work closely with the health and wellbeing board.

3.5 Join up partnership working across Rutland, particularly linking to the Safer Rutland Partnership and ensure there are appropriate links with the Local Safeguarding Children's Board and the Leicestershire and Rutland Safeguarding Adults Board.

3.6 Ensure governance arrangements, strategic partnerships and relationships are in place to progress the JHWS, address any barriers to success.

3.7 To have oversight of the use of relevant public sector resources across a wide range of services and interventions, with greater focus and integration across outcomes spanning health care, social care and public health.

3.8 Make use of flexibilities available such as pooled budgets and lead commissioning arrangements to provide more integrated commissioning across health and social care.

3.9 Focus resources on the agreed set of priorities for health, wellbeing and social care (as outlined in the JSNA and JHWS).

3.10 Ensure that Rutland County Council, East Leicestershire and Rutland Clinical Commissioning Group and Lincolnshire and Leicestershire Local Area Team for the National Commissioning Board demonstrate how the JHWS has been implemented in their commissioning decisions.

3.11 Receive reports from other strategic groups and partners responsible for delivery.

3.12 Have regard to the JHWS when exercising commissioning functions.

3.13 Accountable where applicable for outcomes and targets specific to performance frameworks within the NHS, Local Authority and Public Health.

3.14 Ensure that the work of the board is aligned with policy developments both locally and nationally.

#### **4. Communication and Engagement**

4.1 Develop and implement a Communications and Engagement plan, outlining how the board will be influenced by stakeholders and the public, and how the board will disseminate specific duties required by the board, including consultation on service changes.

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4.2 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.

4.3 Represent Rutland in relation to health & well-being issues at local, regional and national level.

4.4 Ensure there is a protocol in place between the Local Children's Safeguarding Board and the Safeguarding Adults Board to outline the relationship between health and wellbeing matters and safeguarding.

## 5. Membership

### 5.1 Minimum membership of:

- ✧ Two representatives from the East Leicestershire and Rutland Clinical Commissioning Group (2)
- ✧ Two local elected representatives (2):
  - Portfolio holder for health and wellbeing
  - Leader of Rutland County Council
- ✧ The Director of People for Rutland County Council (1)
- ✧ The Director of Public Health for the Local Authority (1)
- ✧ One representative of the local Health watch organisation for the area of the local authority, (1)
- ✧ One representative from the Voluntary and Community Sector as nominated by the Health and Social Care Forum (1) [\(Non statutory member\)](#)
- ✧ One representative from the Lincolnshire and Leicestershire Local Area Team of the NHS Commissioning Board (1)
- ✧ Housing Representation (1) [\(Non statutory member\)](#)
- ✧ One representative from Leicestershire Constabulary (1) [\(Non statutory member\)](#)

and such other persons as the local authority and/or health and wellbeing board thinks appropriate e.g. other groups or stakeholders who can bring in particular skills or perspectives, such as the voluntary sector, clinicians or providers.

5.2 Housing and Community & Voluntary Sector Board members will be able to appoint a maximum of one deputy to attend meetings. Statutory member organisations will not be permitted to send a deputy with the exception of HealthWatch who will be permitted to nominate one named deputy.

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## **6. Voting**

6.1 All members of the Health and Wellbeing Board are allowed to vote (unless the County Council directs otherwise)

6.2 Rutland County Council's Meeting Procedure Rules in relation to voting apply; however it is hoped that decisions of the Board can be reached by consensus without the need for formal voting.

## **7. Standing Orders**

The Access to Information Procedure Rules and Meeting Procedure Rules (Standing Orders) laid down by Rutland County Council will apply with any necessary modifications including the following:-

- a. The Chairperson will be an elected member of Rutland County Council or a member of Rutland County Council's Cabinet.
- b. The quorum for a meeting shall be a quarter of the membership including at least one elected member from the County Council and one representative of the East Leicestershire and Rutland Clinical Commissioning Group.

## **8. Meetings**

8.1 Administration support will be provided by Rutland County Council.

8.2 There will be standing items on each agenda to include:

- Declarations of Interest
- Minutes of the Previous Meeting
- Matters Arising
- Updates from each of the subgroups of the Health & Wellbeing Board

8.3 Meetings will be held in public approximately every quarter (4 times a year)