

## Sheffield City Council Health and Wellbeing Board Terms of Reference **Final**

### 1. Establishing legislation

- 1.1 The Sheffield Health and Wellbeing Board (the Board) is established under the Health and Social Care Act 2012 as a statutory committee of Sheffield City Council (the Council) from 1 April 2013.

### 2. Role of the Board

- 2.1 The role of the Board is to be a strong and effective partnership which improves the commissioning and delivery of services across the NHS and the Council, leading in turn to improved health and wellbeing for the people of Sheffield.

### 3. Statutory functions of the Board and its members

- 3.1 The statutory functions of the Board are:
- To undertake a joint strategic needs assessment (JSNA)
  - To develop a joint Health and Wellbeing Strategy (JHWS) between the Council and NHS Sheffield Clinical Commissioning Group (the CCG)
  - To encourage integrated working between providers including use of pooled budgets and other financial arrangements under s75 of the NHS Act 2006.
- 3.2 As members of the Board, the Council and the CCG must:
- have regard to the JSNA and the JHWS in making commissioning decisions
  - include a statement by the Board in their published commissioning plans.

### 4. Membership

- 4.1 The membership of the Board is:
- Four Elected Members;
    - The Leader of the Council
    - The Cabinet Member responsible for Adult Social Care & Public Health
    - The Cabinet Member responsible for Children & Young People
    - The Cabinet Member for Homes and Regeneration
  - Four CCG clinical representatives
  - A representative from Sheffield Healthwatch
  - Chief Executive, SCC
  - Accountable Officer CCG
  - Director of Public Health
  - Executive Director, Children, Young People & Families, SCC
  - Executive Director, Communities, SCC

- A representative of the NHS Commissioning Board (who will contribute to the JSNA and the JHWS and to discussions related to services commissioned by the NHS Commissioning Board)
- 4.2 Other representatives from the wider health and wellbeing community in Sheffield may be invited to attend the Board from time to time to contribute to discussion of specific issues.

## 5. Governance

- 5.1 **Chair:** The Board will be co-chaired by the Leader of the Council and the Chair of the CCG, with chairing of meetings generally alternating between them.
- 5.2 **Attendance at meetings and deputies:** In order to maintain consistency it is assumed that Board members will attend all meetings. Each member may name 2 deputies, one of whom may attend a meeting and vote in place of the member.
- 5.3 **Quorum:** 2 elected members of the Council plus 2 of the CCG clinical representatives.
- 5.4 **Decision-making and voting:** The Board will operate on a consensus basis. Where consensus cannot be achieved the matter will be put to a vote. All matters to be decided by the Board shall be decided by a simple majority of the members present, but in the case of an equality of votes, the Chair shall have a second or casting vote. Decisions will be made by simple majority: the Chair for the meeting at which the vote is taken will have the casting vote. All votes shall be taken by a show of hands unless decided otherwise by the Chair.
- 5.5 **Authority of representatives:** It is accepted that some decisions will need to be made in accordance with the governance procedures of the organisations represented on the Board: however, representatives should have sufficient authority to speak for their organisations and make decisions within their own delegations.
- 5.6 **Accountability and scrutiny:** As a Council committee, the Board will be formally accountable to the Council. Its work may be subject to scrutiny by any of the Council's relevant scrutiny committees.

## 6. Meetings, agendas and papers

- 6.1 The Board will normally meet quarterly. There will be no fewer than 3 meetings per financial year, with a maximum of 16 weeks between meetings.
- Meetings will be held in public. Dates and venues for meetings, agendas, and papers will be published in advance on the Council's website.
- 6.2 The co-Chairs will agree the agenda for each meeting.
- 6.3 Agendas and papers will be circulated to all members and be available on the Council's website 7 days in advance of the meeting.

- 6.4 Minutes will be circulated to all members, and published on the Council's website as soon as possible after the meeting.

## **7. Engagement with the public**

- 7.1 The Board will hold at least 2 engagement events per calendar year, open to the public. These events will be in addition to the formal, public meetings of the Board and will be a means of:
- engaging the public in the development of the JHWS
  - developing the Board's understanding of local people's experiences and priorities for health and wellbeing
  - communicating the work of the Board in shaping health and wellbeing in Sheffield.

## **8. Engagement with providers of health and wellbeing services**

- 8.1 The Board will hold at least 2 events per calendar year for current and potential future providers of health and wellbeing services in Sheffield. These events will be in addition to the formal, public meetings of the Board and will be a means of:
- engaging these organisations in the development of the JHWS
  - developing a shared perspective of the ways in which providers can contribute to its delivery.

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