

## **Community Area Health and Wellbeing Group Terms of Reference**

### **1. Purpose**

#### **Definition of a Health and Wellbeing Group (HWG)**

The Health and Wellbeing Group is a sub group of the Community Area Board. It represents a wide range of community stakeholders who work in partnership to facilitate well-being across the community area. People and organisations living and working in the community play a direct role in setting the agenda for this group.

HWGs will identify local needs, priorities and outcomes and make recommendations to the Area Board on how funding for activities should be deployed.

### **2. Membership**

The Health and Wellbeing Groups may include representatives of:

- Members of the Community Area Board,
- Older Peoples Champion,
- Carers Champion,
- People from the community,
- Town and Parish Councils,
- Health and social care commissioners,
- Community and voluntary organisations and groups,
- Community transport providers,
- Police,
- Fire and rescue services,
- GP Practices,
- Other organisations, agencies and individuals that have a genuine interest in promoting the welfare and interests of older people.

All representatives must be subject to appropriate safeguarding requirements.

#### **The participation and involvement of people**

People living in the community must play a central role in all aspects of the Health and Wellbeing Groups including the design, development, delivery and review of the local activities.

Health and Wellbeing Groups are encouraged to use a variety of methods to ensure people participate and are involved in decision-making processes. Existing groups may provide a useful forum for involving people, although the decision to retain these groups is for local determination.

Health and Wellbeing Groups must ensure that consultation with people is representative and takes into account the views and needs of under-represented groups (those with protected characteristics) to ensure compliance with the local authorities Public Sector Equality Duty.

#### **Roles of all members of the Health and Wellbeing Groups**

All members will be required to:

- Take an active part in the development of the Health and Wellbeing Group and its aims.
- Ensure that their organisation is represented by a person of appropriate experience/competency (or his/her appointed deputy) who has full authority within the relevant organisation to speak on behalf of the organisation and contribute fully to all discussions.
- Take responsibility for sharing information with the Health and Wellbeing Group relevant to their organisation/ stakeholders/sector.
- Contribute any information that may have a bearing on activities for older people and ensure that this is shared with the Health and Wellbeing Group.
- Champion the voice and influence of people in decision making.
- Be open and honest and work collaboratively.
- Work to promote equality and non-discriminatory practices in all aspects of the Health and Wellbeing Groups activities.
- Respect all members of the Health and Wellbeing Group and invited representatives.
- Work to improve outcomes for people and ensure high quality safeguarding practice.

### **3. Structure**

The Health and Wellbeing Groups should come together on a quarterly basis, operating in a way which encourages active engagement, dialogue, debate and improved partnership working between key stakeholders.

A smaller management group will take responsibility for coordinating and planning the Health and Wellbeing Groups activities. The Chair of the group will be decided locally and could be any member of the Group. The group will include a member of the Community Area Board, who will work with the Chair to present recommendations and provide updates on progress at Area Board meetings.

The management group will generally comprise of:

- The Chairperson
- Older Persons Champion/ Carers Champion
- Community Engagement Manager
- Commissioning representative (Community Commissioner)

The appointment of Councillors (excluding officers) to Health and Wellbeing Groups will normally be agreed at a full meeting of the Area Board. Membership may be varied, with the agreement of the Area Board Chairperson, subject to approval at the next full Area Board meeting.

Where required, the Chairperson and Community Engagement Manager may appoint additional people to the management group if it is felt their involvement would be important for the function of the group.

Alternative people can represent people at the management group, however, it is preferred that the same representative attends if possible to ensure consistency of membership.

### **4. Responsibilities of the Health and Wellbeing Groups**

Key responsibilities for the Health and Wellbeing Groups include:

- Awarding grants that support the priorities identified in the local Joint Strategic Needs Assessment (JSNA).
- Ensuring that any grants and activities take into account any applicable safeguarding implications.

- Making recommendations to the Community Area Board on how priorities for funding should be determined (to include evaluating opportunities for applying for grants)
- Monitoring and reporting on the quality and effectiveness of local activities and grants.
- Based on the JSNAs, local intelligence and Area Board priorities coordinating joint working to deliver these objectives.
- Addressing any conflicts of interest that may arise as part of the local decision making process.

Recommendations to the Community Area Board will usually be reached by consensus but if necessary these can be agreed by a vote.

The management group may invite representatives from local organisations/agencies to its meetings etc to provide expertise or to share local knowledge on activities, projects and programmes in the area.

## **5. Funding**

Area Boards will have an annual revenue budget allocated to them. The Health and Wellbeing group will advise the Area Board on how these funds should be allocated. Health and Wellbeing Groups will be able to bid, apply for funding from other sources and would also be expected to feedback to commissioners on priorities for the Countywide contracts.

## **6. Media Relations**

Members of the Health and Wellbeing Groups may not issue media statements on behalf of the Community Area Board. Any media statements about the work of the Health and Wellbeing Groups should be agreed with between the Health and Wellbeing Groups and Chairperson of the Community Area Board.

## **7. Review**

These terms of reference are subject to change and should be reviewed by the Cabinet Member for Adult Care and Health on an annual basis.