



# **Wirral Health and Wellbeing Board**

## **Memorandum of Understanding**

March 2014

Draft Version 3

## **Memorandum of Understanding**

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## **Foreword**

The purpose of this Memorandum of Understanding is to ensure that the structure and governance arrangements of the Wirral Health and Wellbeing Board provide an effective and transparent framework with clarity of roles and responsibilities and that effective use is made of public resources for the benefit of local people.

Councillor Phil Davies  
Chair

# **Wirral Health and Wellbeing Board - Memorandum of Understanding**

## **1.0 Introduction**

- 1.1 Under the Health and Social Care Act, 2012 all upper tier and unitary local authorities in England took on a new duty to take such steps as they considers appropriate for improving the health of the population of their area. An important step in exercising this duty was the establishment of a Health and Wellbeing Board as a statutory committee of the Council.

The Health and Wellbeing Board has a prescribed core membership but is free to operate with a wider constituency to promote the health and wellbeing of its area. This Memorandum establishes the Wirral Health and Wellbeing Board arrangements for governance, integrated working, joint planning and accountabilities in order to deliver improved outcomes for the health and wellbeing of local people.

## **2.0 Statement of Commitment**

- 2.1 The member organisations of Health and Wellbeing Board are committed to working together at every level to improve the quality of life and wellbeing of the residents of Wirral.

## **3.0 Vision and mission of the Wirral Health and Wellbeing Board**

- 3.1 The vision of the Wirral Health Wellbeing Board is to enable local people to live healthy lives, tackle health inequalities and increase wellbeing in the communities and people of Wirral
- 3.2 The mission of the Wirral Health and Wellbeing Board is to work across professional and agency boundaries to drive innovation make a difference to the health and wellbeing of local people by;
- agreeing priorities and actions to reduce health inequalities and promote health and wellbeing
  - developing a Health and Wellbeing Strategy
  - developing a framework for the effective performance monitoring of the Health and Wellbeing Strategy
  - discussing and evaluating joint performance

## **4.0 Partnership Principles**

- 4.1.1 Members agree to work together actively to achieve the vision and mission of the Wirral Health and Wellbeing Board on the basis of the following values, which will be reflected in Board members behaviour and decision making framework.
- putting local people first in everything we do, putting the needs of local people and communities before organisational boundaries
  - valuing excellence and professionalism wherever it is found

- mutual trust and respect – valuing each person as an individual, taking what others have to say seriously
- being honest about our point of view and what we can and cannot do
- creative and innovative solutions to problems
- removal of barriers to equality of access and opportunity

## **5.0 Governance and Accountability Arrangements**

- 5.1 The Wirral Health and Wellbeing Board requires each partner agency to retain full responsibility for its statutory duties and functions at all times and allows for these duties and functions to be carried out through a system of joint planning and commissioning.
- 5.2 The Board will take responsibility for setting the strategic direction for action to tackle health inequalities and promote health and wellbeing. This includes setting priorities, joint planning, alignment of resources at strategic level and agreeing service models based on service performance and agreed service specifications.
- 5.3 The Board is committed to working with other strategic partnerships in the borough e.g. Wirral Children’s Trust, Wirral Clinical Commissioning Group to ensure activity is aligned to deliver effective partnership working.
- 5.4 Members of the Wirral Health and Wellbeing Board remain accountable to their own organisation and will be responsible for ensuring that approval for all decisions made by the Board is gained from their organisation as appropriate. It is recognised that there are different levels of accountability and risk for individual agencies and organisations.

## **6.0 Decision Making**

- 6.1 Each partner agency accepts collective responsibility for all decisions made by the Board, within the context of their own organisations accountability framework. All decisions will be transparent and informed by open debate, advice, performance reporting and analysis, best practice, risk assessment and option appraisal.
- 6.2 Decision making will be by consensus, wherever possible, but if a consensus cannot be reached, decisions will be taken on a simple majority of those present and voting will be by a show of hands. In the event of a tied vote, the person chairing the meeting may exercise a second or casting vote.
- 6.3 Task and finish groups will be responsible for providing advice to the Board to support the decision-making processes.

## **7.0 Challenge Process**

- 7.1 In exercising collective responsibility for all decisions made by the Board each partner agency will be open to challenge and scrutiny through the formal processes of the accountable body (the Council) and of the other agencies.

7.2 Progress on the delivery of the Wirral Health and Wellbeing Strategy will be performance managed by the Board and an annual review will be published which is open to challenge by any interested party.

## **8.0 Partner Roles and Responsibilities**

8.1 The Local Authority (Council) is responsible for leading the Wirral Health and Wellbeing Board and the Council in the improvement of outcomes for all local people. In this respect the Council is the accountable body for the Wirral Health and Wellbeing Board. The Health and Wellbeing Board is responsible for the development and implementation of the Health and Wellbeing Strategy as the single agreement between the board members on priorities and actions to improve the health and wellbeing of local people.

8.2 National Health Service commissioning organisations are responsible for ensuring that health provision meets the identified needs of local people. Partner health organisations are responsible for ensuring health provision is aligned to the priorities agreed in the Health and Wellbeing Strategy.

8.3 The Voluntary Community and Faith Sector has a significant expertise in the delivery of services and in engaging local people in identifying needs, innovative service models and commissioning priorities. The Voluntary Community and Faith Sector representation is responsible for informing the Wirral Health and Wellbeing Board on these areas of expertise and for ensuring the sector has a voice in identifying priorities and actions in the Health and Wellbeing Strategy.

## **9.0 The Scope of Involvement**

9.1 The Wirral Health and Wellbeing Board will demonstrate clear links to the Local Strategic Partnership (LSP) and other strategic partnerships e.g. Wirral Children's Trust to ensure that strategies are not fragmented and that different services share priorities and thinking.

9.2 The views of local people are at the centre of strategic planning and service design. The Wirral Health and Wellbeing Board will ensure ongoing high quality consultation with local people is undertaken to empower and engage the wider community. Specific consultation will be carried out during the preparation of the Health and Wellbeing Strategy.

## **10.0 Leadership**

10.1 Each Board member will act on behalf of their organisation as an ambassador for to promote the health and wellbeing of the people of Wirral locally, regionally and nationally. Board members will take responsibility for ensuring the agreed actions are carried out and their agency/sector is fully informed about the work of the Wirral Health and Wellbeing Board and engaged in the delivery of the Health and Wellbeing Strategy.

## **11.0 Performance Management**

- 11.1 Each member of the Board will take full responsibility and accountability for the delivery of the outcomes agreed for the Health and Wellbeing Strategy.
- 11.2 The Board will review progress in achieving improved outcomes on a regular basis. Management information reports will inform the Board of the progress being made in achieving the outcome measures set out in the Health and Wellbeing Strategy.

## **12.0 Information Sharing**

- 12.1 The Board will ensure that information sharing protocols are designed to enable intelligence gathering for effective needs analysis to be carried out on a continuous basis

## **13.0 Risk Assessment**

- 13.1 Risks associated with the delivery of the Health and Wellbeing Strategy will be managed by the Public Health Team and escalated to the Board for formal assessment when necessary.

## **14.0 Equalities and Inclusion**

- 14.1 The Health and Wellbeing Board will operate on the basis of principles that actively value the benefits of diversity and ensure fair treatment and equality of opportunity.
- 14.2 On an annual basis an equalities impact assessment will be carried out through a review of the Health and Wellbeing Strategy.

## **15.0 Dispute and Conflict Resolution**

- 15.1 Members of the partnership:
- Must not use their position improperly, confer on, or secure for themselves or any other person, an advantage or disadvantage
  - Must not unduly influence any person in the paid employment of any of the partner agencies
  - Must ensure that activities are not undertaken for political purposes
- 15.2 Issues of conflict within the partnership will be resolved initially by informal discussion. If this is not successful the issue will be referred to the Chief Executive of each agency who will meet to attempt to resolve the issue. If the issue is still not resolved appropriate alternative dispute resolution (ADR) will be considered.

## **16.0 Review of the Memorandum of Understanding**

- 16.1 This Memorandum of Understanding will be reviewed on an annual basis.

## **17.0 Wirral Health and Wellbeing Board - Terms of Reference**

### **17.1 Vision**

To enable people to live healthy lives, tackle health inequalities and increase wellbeing of the communities and people of Wirral

### **17.2 Mission**

To work across professional and agency boundaries to drive innovation make a difference to the health and wellbeing of local people by;

- agreeing priorities and actions to reduce health inequalities and promote health and wellbeing
- developing a Health and Wellbeing Strategy
- developing a framework for the effective performance monitoring of the Health and Wellbeing Strategy
- discussing and evaluating joint performance

### **17.3 Purpose**

The Health & Wellbeing Board will not be responsible for directly commissioning services, but will provide oversight, strategic direction and coordination of the following activities:

- To develop a shared understanding of the needs of the local community through the development of an agreed Joint Strategic Needs Assessment
- To seek to meet those needs through leading on the on going development of a Health & Wellbeing Strategy
- To provide a local governance structure for local planning and accountability of health and wellbeing related outcomes
- To work with HealthWatch in Wirral to ensure appropriate engagement and involvement within existing patient and service user involvement groups takes place
- To drive a collaborative approach to commissioning of improved health and care services which improve the health and wellbeing of local people
- To consider and take advantage of opportunities to more closely integrate health and social care services in commissioning and provision
- To review the financial and organisational implications of joint and integrated working across health and social care services, ensuring that performance and quality standards of health and social care services are met, and represent value for money across the whole system



- To establish a key forum for local democratic accountability relating to commissioning against agreed health outcomes
- To establish a productive working relationship with the Local Strategic Partnership to ensure there is no duplication of activity
- **NEW:** To develop and update the Pharmaceutical Needs Assessment (PNA)
- **NEW:** To ensure the Better Care Fund plan is monitored regarding its progress and performance and ensure the health and social care partners effectively plan regarding the implications of this work

### 17.3 Core Membership

Organisation	Representative
Wirral Borough Council	<ul style="list-style-type: none"> <li>• All three party leaders</li> <li>• Chief Executive</li> <li>• Director of Public Health</li> <li>• Director of Adult Social Services</li> <li>• Director of Children and Young People's Services</li> </ul>
Wirral Clinical Commissioning Group	<ul style="list-style-type: none"> <li>• Chair</li> <li>• Accountable Officer</li> </ul>
HealthWatch	<ul style="list-style-type: none"> <li>• Representative</li> </ul>
National Commissioning Board – Local Are Team; Cheshire, Warrington and Wirral	<ul style="list-style-type: none"> <li>• Representative</li> </ul>

### 17.4 Co-opted members

Wirral Borough Council	<ul style="list-style-type: none"> <li>• Portfolio holder for Social Care and Inclusion</li> <li>• Portfolio holder for Children's Services and Lifelong Learning</li> <li>• <b>PROPOSED:</b> Representative from Housing</li> </ul>
Voluntary, community and faith sector	<ul style="list-style-type: none"> <li>• Chief Executive, Voluntary &amp; Community Action Wirral</li> </ul>
NHS	<ul style="list-style-type: none"> <li>• Chief Executive, Wirral University Teaching Hospital NHS Foundation Trust</li> <li>• Chief Executive, Wirral Community NHS Trust</li> <li>• Chief Executive, Cheshire &amp; Wirral</li> </ul>

	Partnership Trust <ul style="list-style-type: none"> <li>• Chief Executive, Clatterbridge Centre for Oncology NHS Foundation Trust</li> <li>• Representatives from the three divisions of the Clinical Commissioning Group to present annual commissioning plan</li> </ul>
<b>PROPOSED - Police &amp; Fire</b>	<ul style="list-style-type: none"> <li>• <b>PROPOSED:</b> Representative from Merseyside Police</li> <li>• <b>PROPOSED:</b> Representative from Merseyside Fire &amp; Rescue Service</li> </ul>
<b>PROPOSED: Employment &amp; job skills</b>	<ul style="list-style-type: none"> <li>• <b>PROPOSED:</b> Representative from Jobcentre Plus</li> </ul>

17.5 Representatives of other bodies may be invited to participate in Board discussions, or co-opted, to support effective decision-making. Such representatives should be invited bearing in mind the principles of fairness, equality and transparency.

#### 17.6 Meetings

Formal meetings will be held 3-4 times during the year. Development sessions will also be held for Board members during the year as required.

Agendas and minutes of formal meetings of the Board will be published on the Council website.

#### 17.7 Chair

The Leader of the Council will chair the Health & Wellbeing Board.

#### 17.8 Decisions

Where a decision is required, that decision will be made by agreement among a majority of members present. Where a decision needs to be ratified by one or more of the statutory agencies, the ratification process will be in accordance with the agreed process within that particular agency.

Agenda Setting Group

Will agree the draft agenda and pass to Chair for approval.

#### 17.9 Minutes

Minutes of the proceedings of each meeting of the Health & Wellbeing Board will be drawn up, circulated and agreed as a correct record at the subsequent meeting, once any required amendments have been incorporated.

#### 17.10 Support to the Health & Wellbeing Board

The Policy, Performance & Public Health Directorate will provide the following key

functions to Wirral Health and Wellbeing Board:

- Minute taking and distribution
- Performance management reporting arrangements
- Seek appropriate contributions from partners to support the Health and Wellbeing Board governance framework
- If required, send representation to advise groups in terms of processes relating to governance reporting and standard agenda items

### 17.11 Review

The membership and terms of reference of the Health & Wellbeing Board will be regularly reviewed (at least annually) to ensure that they remain relevant and up to date.

## 18 Sub-groups

The structure of the Health & Wellbeing Board contains the following sub-groups:

- The **Health Protection Forum** – which will provide assurance to the Board regarding the adequacy of prevention, surveillance, planning and response to health protection issues
- The **Joint Strategy Needs Assessment Executive Group (JSNA Exec Group)** which is the way that Board partners discharge their responsibility for ensuring that local people get the sorts of services they need.
- The **Vision 2018 Programme Board** which is responsible for transforming the delivery of health and social care in the future.
- The **Wirral Strategic Commissioning Group** which provides the partnership system with strategic oversight and co-ordination from a commissioning perspective.

## 19.0 Task and finish groups

19.1 Multi agency task and finish groups will be established as appropriate to progress the work of the Board and Health and Wellbeing Strategy. They will be accountable to the Wirral Health and Wellbeing Board.

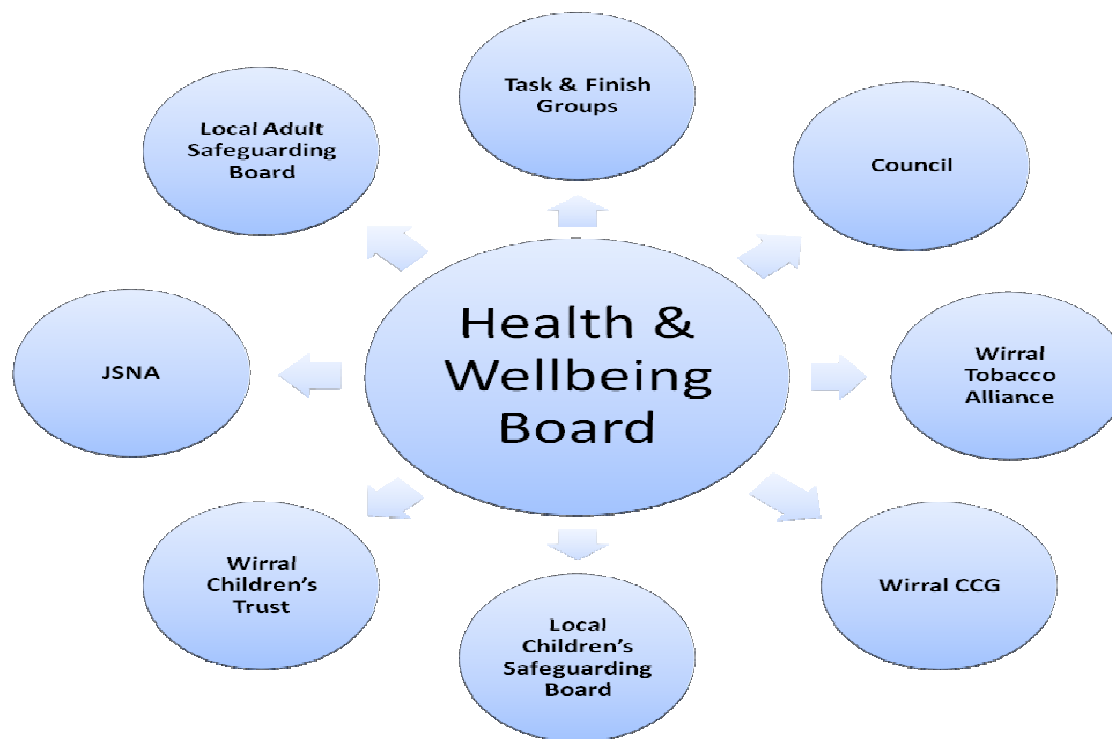
19.2 Task and finish groups are responsible for:

- The monitoring and reporting on progress
- Receiving information from and responding to requests from other groups and stakeholders
- Making quarterly performance progress reports highlighting areas of poor performance, issues and risk
- Developing opportunities for multi-agency involvement and networking to share best practice
- Providing support and information to other groups within the Borough.

- Maintaining effective arrangements to consult with local people act on the results of the consultation and provide feedback

19.3 The membership and chair of the groups will be agreed by the Health and Wellbeing Board. Meeting arrangements will be agreed by each group to meet the timescale set by the Health and Wellbeing Board.

## Appendix One: The Structure of the Wirral Health and Wellbeing Board



**Figure 1: The Structure of the Wirral Health & Wellbeing Board**

## Appendix Two: Terms of Reference of sub-group: Health Protection Group

### Wirral Health Protection Group

#### Terms of Reference

January 2014

##### **Purpose:**

To provide assurance to the Director of Public Health and the Health and Wellbeing Board, on behalf of the population of Wirral, that there are safe and effective arrangements and plans in place to protect the health of the population.

To improve integration and partnership working on health protection between the Local Authority, NHS, Public Health England and other local services.

The scope of health protection to be considered will include: prevention and control of infectious diseases, vaccination, screening, health-care associated infections, emergency planning and environmental hazards.

##### **Functions:**

1. To provide assurance to the Health and Wellbeing Board that there are safe and effective health protection arrangements and plans.
2. To provide strategic oversight of the health protection system in Wirral.
3. To provide a forum for professional discussion by local partners of health protection plans, risks and their mitigation and opportunities for joint action.
4. To provide oversight of key health protection intelligence, including outcomes and information derived from incidents, complaints and investigations and surveillance of infectious diseases.
5. To produce an annual report, summarising key elements of assurance across the local Health Protection system.
6. To highlight risks and provide recommendations on behalf of the Health and Wellbeing Board about the strategic management of these risks.
7. To share and escalate concerns and risks to commissioners and appropriate bodies when health protection plans and arrangements are inadequate to provide sufficient protection of patients or public safety. The appropriate escalation route will depend on individual concern or risk, e.g. LA management team, CCG, NHS England (CWW), Health and Wellbeing Board, Local Health Resilience Partnership.
8. To share and escalate concerns to commissioners and regulators, where relevant, when a provider's management of healthcare associated infections is or may be inadequate to provide sufficient protection of patients or public safety.

9. To review the reports of significant incidents and outbreaks, consider recommendations for change as a result, and promote quality improvement of the health protection system through encouraging implementation of recommendations.
10. To promote reduction in inequalities in health protection across the Local Authority area.
11. To identify key health protection needs for collaborative work to feed into the Joint Strategic Needs Assessment process.

### **Governance Arrangements:**

It is proposed that the Wirral Health Protection Group will report on a quarterly basis to the Families and Wellbeing Policy and Performance Committee and will provide an annual report to the Health and Wellbeing Board, through the Director of Public Health. Where there is a need to escalate concerns/risks, this will be done through the Health and Wellbeing Board, Local Health Resilience Partnership, Senior Management team of Wirral Council, CCG, NHS England (CWW) as appropriate.

### **Chair and Membership**

The Director of Public Health will chair the group. Core membership will be as listed below:

<b>Title</b>	<b>Organisation</b>
Director of Public Health	Wirral Council
Head of Public Health	Wirral Council
Consultant in Health Protection	Cheshire West & Chester/Wirral
Consultant in Health Protection	Public Health England
Head of Emergency Planning	Wirral Council
Head of Environmental Health	Wirral Council
Champs Health Protection Programme Lead	Champs Collaborative Service
Screening and Immunisation Lead	CWW Area Team
CCG Chief Nurse/Health Protection lead	Wirral CCG

### **Administration of Meetings**

Capacity will be identified through the Office of the Director of Public Health to take minutes and distribute papers.

**Frequency of meetings**

The group will meet on a bi-monthly basis. The schedule of meetings will be agreed at the inaugural meeting.

**Extraordinary meetings**

In addition, extraordinary meetings may be called as and when appropriate.

**Quorum**

At least 50% of membership must attend for the meeting to go ahead and a report will be expected by those members unable to attend.

**Co-opted members**

Additional members can be co-opted to the group as and when required.

**Communication of Forum recommendations**

All members of the group will assume responsibility for communicating group recommendations to appropriate colleagues following each meeting.

**Reporting framework**

The group will report to the Families and Wellbeing Policy and Performance Committee on a quarterly basis and will provide an annual report to the Health and Wellbeing Board Health & Wellbeing Board.

**Review**

Terms of reference will be reviewed on an annual basis



## **Appendix Three: Terms of Reference of sub-group: WIRRAL STRATEGIC COMMISSIONING GROUP**

### **DRAFT TERMS OF REFERENCE**

#### **Background**

Health and social care integration should improve service quality, drive efficiency and deliver improved outcomes for the residents of Wirral.

The Wirral Health and Social care economy is committed to working towards integrated care services and this group has been formed to provide the partnership system with strategic oversight and co-ordination from a commissioning perspective.

The strategic partnership will enable collective decisions to be made on the review, planning and financial/performance implications of those areas in scope of joint working.

#### **Principles**

The suggested core principles of the partnership are listed below:

- To place quality, innovation, productivity and prevention at the heart of its business by considering the impact of decisions on the quality of care and the patient experience
- To engender and demonstrate trust through the partnership approach
- To take a holistic and integrated approach to people (customers and patients)
- To take a holistic and integrated approach to the health and social care system investments and savings. This is to focus on the areas in scope but be mindful of the wider health and social care system.
- To ensure transparent information sharing in relation to business planning – minimising risk from unforeseen / unplanned activity
- To ensure transparent information sharing in relation to performance and financial information
- To share strategic and operational practice
- To provide a focus for the development and reporting of integrated commissioning in the key areas
- To support member organisations to comply with all statutory duties including, but not limited to, the duty to involve and consult the public, the duty to consult

#### **Function**

- Define the scope of the integrated commissioning approach for Wirral
- Define models for integrated commissioning
- To identify services for integrated commissioning over the short and long term – informed by cost/risk assessment
- Monitoring and report on progress in line with the agreed strategic vision

## Role of Members

The members of the Wirral Integrated Commissioning Group will be of senior level within their respective organisations and have the ability to make decisions and escalate issues as appropriate. They will also ensure compliance with governance arrangements. Members will be responsible for disseminating information to and from their organisations, departments or professional groups.

## Membership

Name	Title	Organisation
Dr. Abhi Mantgani	Chief Clinical Officer	NHS Wirral CCG
Clare Fish	Strategic Director of Families and Wellbeing	Local Authority
Fiona Johnstone	Director of Public Health	Local Authority
Graham Hodkinson	Director of Adult Social Services	Local Authority
Julia Hassall	Director of Children and Young People's Services	Local Authority
Dr. Phil Jennings	Chair	NHS Wirral CCG
Dr. Pete Naylor	Governing Body GP Representative	NHS Wirral CCG
Dr. John Oates	Governing Body GP Representative	NHS Wirral CCG
Dr. Mark Green	Governing Body GP Representative	NHS Wirral CCG
Paul Edwards	Head of Corporate Affairs	NHS Wirral CCG
Tony Kinsella	Head of Performance and Commissioning	Local Authority
Mark Bakewell	Chief Financial Officer	NHS Wirral CCG
Paul Cook	Head of Challenge & Business Process DASS	Local Authority

**Note:** Additional members will be invited as and when required.

## Potential work areas within scope of the Strategic Partnership

Strategic workstreams:

- Integration Transformation Fund
- Scoping and agreeing the strategic vision
- Interdependencies with commissioning for Carers services
- To promote improvement in relation to equality standards as well as improved outcomes
- To support the promotion of behavioural change in planning and commissioning services to enable greater independence and promote less dependence
- To oversee resources for any services in scope where necessary

Service Delivery workstreams:

- Drugs & alcohol services
- Voluntary Sector commissioning
- Mental Health/Dementia
- Disability services (learning and physical)
- Continuing care
  - Prevention & early intervention
- Urgent care
- Loneliness & social isolation

### **Frequency of Meetings**

Monthly (to be reviewed after 6 months)

### **Communication and Accountability Arrangements**

Members will retain accountability to their respective organisational governance arrangements, but with a strategic aspiration to increase levels of delegated authority.

The group will ensure that the development of the provider landscape discussed through the Vision 2018 Board is aligned to the strategic partnership vision.

The Joint Commissioning Group is accountable to the Health & Wellbeing Board. This will enable the Board to deliver its statutory duty to promote integrated working across health and social care commissioning.

### **Chair**

Chief Clinical Officer of NHS Wirral CCG

### **Quorum**

At least one representative from each of the following areas: Public Health, Families and Wellbeing and NHS Wirral CCG

### **Administrative Support**

Tessa Woodhouse, Commissioning Project Support Officer

### **Date of Ratification/Date of Review**

First draft: 16<sup>th</sup> September 2013

Final Draft:

Date of approval:

Date for review:

Abhi Mantgani

Chief Clinical Officer

NHS Wirral CCG

Clare Fish

Strategic Director of Families & Wellbeing

Wirral Council

16<sup>th</sup> September 2013

## **Appendix Three: Terms of Reference of sub-group:**

### **Wirral JSNA Executive Group**

#### **Terms of Reference**

##### **Background**

The Local Government and Public Involvement in Health Act (2007) placed the original duty upon Local Authorities and Primary Care Trusts to work together to produce a Joint Strategic Needs Assessment (JSNA) for their local population.

The 2012 Health & Social Care Act now places the Health and Wellbeing Boards on a statutory footing and ascribes specific new functions to them, in addition to joining-up the NHS, social care, public health and other local services. There is a statutory duty on Clinical Commissioning Groups, the Local Authority and the NHS Commissioning Board, to jointly produce and publish a JSNA. The new legislation also places a duty on the local authority and clinical commissioning groups to produce and publish a Health and Wellbeing Strategy for meeting the needs identified in their JSNA.

The new act requires the local authority, clinical commissioning groups, and NHS Commissioning Board, when exercising '*any of its functions*', to have regard to the JSNA findings and the Health and Wellbeing Strategy. These bodies are also required to 'sign off' any commissioning plans and confirm their alignment with their local Health and Wellbeing Strategy.

In each local authority it is the Health and Wellbeing Board that will be responsible for overseeing both the JSNA process and the Health and Wellbeing Strategy.

##### **Purpose of the Executive Group:**

Wirral's Health and Wellbeing Board is required to lead the continued development of the local Joint Strategic Needs Assessment (JSNA) process with an emphasis on intelligence and evidence provision e.g. through the JSNA Website. Also the development of the next generation of Pharmaceutical Needs Assessment (PNA) for Wirral.

The Health and Wellbeing Board leads on the development of a Joint Health and Wellbeing Strategy (JHWBS) which is underpinned by the JSNA. The Act places a legal obligation on Clinical Commissioning Groups (CCGs) and the Local Authority as having a 'duty to have regard' to the JHWBS in exercising their commissioning functions.

Therefore the purpose for Wirral's JSNA Executive Group is to give strategic direction and overall programme management to the JSNA and now Pharmaceutical Needs Assessment (PNA) processes so that they meet current and future demands.

##### **Aim of the Executive Group:**

The JSNA Executive Group will lead the ongoing development and utilisation of robust joint intelligence and strategic needs assessment to inform strategic planning and strategic commissioning of services in Wirral which in turn inform the Health & Wellbeing Board, its Joint Health & Wellbeing Strategy and future Pharmaceutical Needs Assessment (PNA).

## **Core Objectives:**

- Ensure the development of the JSNA directly supports the production of the Health & Wellbeing Strategy for Wirral
  - Influence local leadership to embed JSNA within processes for the planning and coordination of local services and support key commissioning and service provision decisions (local structure)
  - Improve the co-ordinated approach to commissioning activity, across Council departments and partner organisations through the utilisation of the JSNA.
  - Direct the development and future use of JSNA through the statutory Health & Wellbeing Board.
  - Facilitate the development of working relationships with Wirral CCG and their use of JSNA in the commissioning of services in relation to the Health & Wellbeing Board and the production of its Health & Wellbeing Strategy for Wirral.
  - Positively influence and develop the working relationships with all local partners and organisations with regard to their systematic use and content development of JSNA specifically the commissioning of services, the future delivery of Wirral's Health & Wellbeing Board and its associated Health & Wellbeing Strategy
  - Direct the development of opportunities for public and wider community, service users and providers as contributors to Wirral's JSNA
  - Oversee the development and deployment of joint intelligence and data resources across the health and wellbeing strategy board partners and beyond
  - Ensure the statutory functions relating to JSNA are met in full and relevant documents are completed and provided in a timely manner.
  - Ensure the JSNA is of a suitable quality in its process, production and provide the necessary assurance to the Health & Wellbeing Board.
  - Promote the benefits of JSNA utilisation to all partners.
- 4.12 Undertake the management of the current Pharmaceutical Needs Assessment (PNA) and the development and production of a future PNA.

**Membership:**

Representation will be designated from the following roles and functions:

<b>Role</b>	<b>Function</b>	<b>Representative</b>	<b>Named and briefed deputy</b>
Three statutory lead Directors	Director of Adult Social Services	Graham Hodkinson	Steve Rowley
	Director of Children's Trust	David Armstrong	Nancy Clarkson
	Director of Public Health	Fiona Johnstone	Tony Kinsella
Joint Intelligence lead officer	Head of Performance and Public Health Intelligence	Tony Kinsella	John Highton
Clinical Commissioning Group	Wirral CCG (representing all 3 Federated CCGs)	Andrew Cooper Chief Operating Officer for WHCC	
		Christine Campbell Chief Operating Officer for Wirral GPCC	
		Iain Stewart Chief Operating Officer for Alliance	
Chair of JSNA Engagement Group	Chief Executive, Voluntary & Community Action Wirral (VCAW)	Annette Roberts	Senior Manager (Karen Livesey or Karen Prior)
HWB member			
HWB member	Medical Director , Wirral Community Trust	Ewen Sim	
HWB member	Wirral University Teaching Hospital	Melanie Maxwell	
HWB member	Clatterbridge Cancer Centre		
HWB & JSNA Communications and Engagement	Head of Communications and Community Engagement	Emma Degg	
JSNA Programme Lead	JSNA Programme Lead, NHS Wirral & Wirral Council	John Highton	Tony Kinsella
NCB Primary Care Lead	Deputy Director of Primary Care	Glenn Coleman	
Others	To be added	To be added	To be added
Others	To be added	To be added	To be added
Others	To be added	To be added	To be added

## **Accountability, Obligations and Responsibilities**

### **Health & Wellbeing Board and JSNA**

Local Authority and Wirral CCG have the duty that is discharged through the Health & Wellbeing Board to prepare JSNA in relation to Local Authority area and with regard to guidance from Secretary of State that considers need or likely need capable of being met or affected by Local Authority or Wirral CCG functions.

This duty to prepare a JSNA will be exercised through the JSNA Executive Group (and structure) and reporting directly to the Health & Wellbeing Board

Local Authority and Wirral CCG have the duty that is discharged through the Health & Wellbeing Board to prepare Joint Health & Wellbeing Strategy based on JSNA in relation to Local Authority area with regard to guidance from Secretary of State

Health & Wellbeing Board requires the JSNA Executive Group to support the work in developing the Joint Health & Wellbeing Strategy as a sub-committee of the full board. Reporting and accountability will be required to the HWBB on a regular and timely basis

Health & Wellbeing Board, and consequently the JSNA Executive Group, has a duty to involve third parties in preparation of the JSNA and JHWS such as Local HealthWatch and people living or working in the area

Health & Wellbeing Board has the duty to have regard to the NHS Commissioning Board mandate and statutory guidance in developing the JSNA and JHWS

Health & Wellbeing Board has the power to consult any other persons it thinks appropriate on preparation of the JSNA and the JSNA Executive Group will act upon this mandate when exercised.

### **Health & Wellbeing Board and Pharmaceutical Needs Assessment**

The Department of Health guidance for new Health & Wellbeing Boards in relation to JSNA & Joint Health & Wellbeing Strategies (JWHBS) identifies and directs the HWB as to their responsibility to undertake next generation PNAs as a separate and distinct duty. We have chosen to link these processes. The PNA will inform the NHS Commissioning Board (NHS CB) decisions on the commissioning of pharmacy services for Wirral.

### **Local Authority and JSNA**

The Local Authority has a duty to publish the JSNA and Joint Strategic Needs Assessment

The Local Authority must exercise its duty to have regard to JSNA and JHWS in the exercising of relevant commissioning functions

## **Wirral Clinical Commissioning Group and JSNA**

Wirral CCG must exercise its duty to have regard to JSNA and JHWS in the exercising of relevant commissioning functions

### **JSNA Executive Group**

JSNA is a duty of the Local Authority and Wirral CCG under the leadership of the Directors of Public Health, Adult Social Services, Children's Services and Wirral CCG representatives

JSNA Executive Group members agree to undertake the actions as stipulated above, wherever possible, in the pursuit of meeting the demands and obligations of the Health & Social Care Act 2012

Each Executive Group member is responsible for establishing communication links with their relevant networks around JSNA in an appropriate and timely manner.

Each Executive Group member will ensure decisions relating to the JSNA will be communicated through their sphere of influence and provide officer support in the completion of any associated actions

Each Executive Group member acknowledges that they are entering into these arrangements and will participate in developing the work of the Executive Group on the basis of the demands and necessities of the Health & Social Care Act and its implied duties and obligations for local partners.

Each Partner agrees to adopt a policy of mutual openness about information and their intentions relevant to the remit of the Executive Group.

Where decisions of the Group require ratification by other bodies, the relevant Executive Group Member shall seek such ratification promptly following the Group's recommendations.

Receive communications on behalf of the Health & Wellbeing Board from NHS Commissioning Board in relation to local pharmacy services. Undertake to review and consider the content received and offer a response to the NHS CB on behalf of the HWB. Such responses and subsequent ongoing dialogue will be reported to the board at the next opportunity.

### **JSNA Programme Management:**

The Project Management for Wirral's JSNA is currently led by Public Health through the JSNA Programme Lead. This project management role includes:

Managing the JSNA on a day to day basis on behalf of the Executive Group and the wider partners.

Through the JSNA Programme Lead ensuring the implementation of the work plan and reporting progress to the Executive Group.

Developing the accessibility of supporting information and data sources

Ensuring interactive/on-line version remains current to available information.



Developing and instigating methodology and outcome tracking for ensuring quality of JSNA content, systems, and process for the assurance of the HW.B

### **Advisory Members**

The JSNA Executive Group can call upon officers to be in attendance at meetings as Advisory Members of the Group.

The role of Advisory Members is to advise assist and provide information to the Group and where appropriate participate in discussions at meetings of the Group.

An Advisory Member may nominate a substitute to attend in their place, subject to notifying the Chair before the relevant meeting and that deputy being suitably able to provide the information and analysis seen as required.

The Group may invite any person to the Group's meetings to advise assist and provide information to the Group as it sees fit on a non-voting basis.

### **Designated Task Groups**

Task Groups will be established to carry out programmes of work as required by the JSNA Executive Group. These will include:

**JSNA Engagement Task Group** – seeks to ensure the involvement of voluntary, community, third sector, patient and public in the development and interpretation of health and wellbeing joint intelligence.

- Membership will include an engagement facilitator from either the Local Authority or NHS Wirral and representatives from LINK and VCAW. Further membership and terms of reference will be developed by the core group.

**Pharmaceutical Needs Assessment Development Group** - seeks to undertake the development of the next generation PNA for Wirral.

- Membership to include Deputy Director for Public Health, representative of NHS CB, representative of Wirral Local Pharmacy Committee (LPC) and Wirral JSNA lead and other co-opted members required to complete the task that could include other public health colleagues, partner engagement leads and others with necessary expertise. For full details see PNA DG ToR.

Any Task Group will designate a representative/s as Chair/Deputy Chair of the Task Group to carry out the following tasks:

Ensure agendas, minutes and meetings are arranged efficiently and papers (pre/post) are circulated to Task Group members accordingly.

Arrange for minutes/actions from the Task Group to be provided to the administrator for the Executive Group for timely distribution to Group members

All Task Groups should have Terms of Reference established and in case of task and finish groups then the clear identification of end date/ completion tasks. Membership must always reflect the coverage of JSNA across partners and other organisations as appropriate and possible.

Nominated representative to attend the JSNA Executive Group as requested to consider specific aspects of the JSNA work plan and raise issues agreed with the Task Group / ensure ongoing communication between the groups and feedback on work plan progress.

### **Public Statements**

Public statements on behalf of the Executive Group can only be made by the Chair and with the prior approval of the Executive Group. Where that is not possible for reasons of time or expediency, any such actions taken by the Chair shall be reported to the next meeting of the Board.

With Executive Group representation from Wirral Council as lead for Health & Wellbeing Board Communications and Engagement then any/all public statements from the chair or the group would be provided through Head of Communications and Community Engagement or their nominated representative

### **Administration:**

Minutes will be taken by a Wirral Council administrator and will be distributed within two weeks of the meeting.

This will include:

Attending to take minutes of the meeting;

Keeping a record of matters arising and issues to be carried forward to the next meeting;

Providing appropriate support to the Chair;

Collating papers for meetings, circulating them before the meeting;

### **Executive Group Governance**

#### **Frequency of meetings:**

Meetings will be held once every three months but with the proviso of ad hoc meetings if necessary.

Task Groups will meet as determined by their work programmes.

Meetings will be held at Old Market House unless otherwise agreed by Executive Group members

#### **Chairing of meetings**

Meetings shall be chaired by Deputy Director of Public Health

In the absence of the nominated chair another member of the group shall chair the meeting

#### **Attendance at meetings:**

Members are expected to attend meetings as far as reasonably practicably possible. If members are unable to attend they are expected to send a fully briefed named deputy as their representative to ensure their area of expertise is reflected on the Executive Group. (See table on page 3)

Other colleagues will attend the meeting by invitation as required.

### **Quorum**

A minimum of four members will need to be present for the meeting to be considered able to decide on matters.

The membership should include at least:

One of the three directors/deputy director for public health, adult social services or children's services as chair or deputy

One of the GP Consortia lead officers or GP leads

One of representatives of Health Information team

### **Declaration or conflict of interest**

Members must declare any conflict of interest in a matter being considered by the Executive Board, that

Arises from their personal circumstances, or

Arises in respect of the partner which they represent.

Any Executive Group member who declares an interest or conflict of interest may, at the discretion of the Chair,

Be required to leave the meeting while the matter is discussed; or

Remain in the room but not participate in the discussion;

### **Leaving the Group**

A Group Member shall cease to be a Member of the Group if:

He or she resigns;

The partner notifies the Group of a change of representative; or

The partner ceases to exist.

Should any partner wish to withdraw from the group, six months' notice must be given in advance to the Chair of the group.

### **Access to Meetings**

The JSNA Executive Group is NOT a public meeting and as such is not open to public to attend

### **Alterations to the Terms of Reference**

The Executive Group will have flexibility to amend the terms of reference as and when agreed at meetings, up to and including 12 months from its first meeting in 2011.

Thereafter and subject to the following provisions, the Terms of Reference and associated documentation may be altered at a meeting of the Group.

## **Dissolution**

The Board may be dissolved where:

The members have agreed at an Executive Group Meeting that the group should be dissolved; and

Where the members have agreed a detailed exit strategy which addresses adequately all the consequences of dissolution including:

- The relationship with Wirral's Health & Wellbeing Board
- The relationship with service providers
- Any financial impact of dissolution
- All other relevant issues, including the need to ensure continued compliance with relevant statutory provisions

Members agree to ensure that the minimum of disruption is caused to service users in Wirral by the dissolution

## **Review**

**Terms of Reference** will be reviewed at least annually.

**Membership** will be reviewed at least annually.

**JSNA Workplan** will be reviewed after 3 months and progress at each meeting

**Full JSNA** will be reviewed at least annually.

**Sections of the JSNA** will be reviewed as and when new information becomes available and version control will be maintained

**Chair** will be confirmed annually at a meeting of the Executive Group

**Quality of JSNA process and JSNA development.**to provide HWB assurance.  
(January to March each year)

## **Date of ratification/date of review**

<b>First version</b>	July 2011 (John Highton)
<b>First review</b>	November 2011 (John Highton)
<b>Latest Review:</b>	
<b>First draft:</b>	July 2011 (John Highton)

**Final Draft** October 2012 (John Highton)

**Date of approval:** October 2012

**Date for next review:** March 2013

**Second Review:**

**First draft** July 2013 (John Highton)

**Second draft** December 2013 (John Highton)

**Final Draft** January 2014

**Date of approval:** March 2014 - Tbc

## Appendix Four: Terms of Reference of sub-group:

### VISION 2018 Programme Board MEMORANDUM OF UNDERSTANDING/TERMS OF REFERENCE

#### Background

It is clear from the national agenda surrounding 'A Call to Action' that there is a real and significant challenge facing the NHS and its partners in the coming years. It is expected that rising demand, new technology and increased expectations of its patients will be against the backdrop of flat funding which, if services continue to be delivered in the same way as now, will result in a funding gap which could grow to £30bn between 2013/14 to 2020/21.

With this in mind, the Vision 2018 Group has been set up to enable leaders from the Health and Social Care Economy to come together in partnership to address these challenges together.

#### Health and Social Care in Wirral – Vision 2018

Health and social care services in Wirral are committed to a shared vision:

***To ensure the residents of Wirral enjoy the best quality of life possible, being supported to make informed choices about their own care, and being assured of the highest quality services.***

To achieve this we commit to the following principles:

- Our strategy will promote good health and seek to reduce health inequalities.
- Everything we do is aimed at improving outcomes and the experiences of the population of Wirral, and of the people who use our services, their families and carers.
- We will engage with the people who use our services as partners, establishing a new and equal relationship with our professional staff in co-designing and continually improving services.
- We will promote and support early intervention and prevention, encouraging people to self-help and supporting the development of strong communities.
- We will provide person centred care that considers an individual's physical and mental health and well-being needs, and that supports them to be the best they can.
- We will provide care and services focused around the individual ensuring access to appropriate services whatever the individual, first point of contact.
- We will ensure that the way health and care is provided delivers high quality services which are safe, accessible and sustainable for our future patients and communities.
- We will ensure the location of services is in or as close as possible to people's own homes, with hospital and residential care targeted at those whose needs cannot be met in a community setting.
- We will ensure our workforce is fully engaged and contributes to the development of this vision and the services that are part of it, and changes appropriately to reflect these developments.

- We will maximise the opportunities to make an even greater difference to people's lives through working with other sectors e.g. housing, voluntary sector.

## **Work-streams**

A number of work-streams to deliver specific elements of the overall aims and objectives will work below the Vision 2018 Group. These will be in three broad areas:

### ***Drivers***

The key work-stream here will be:

- Financial and population modelling
- Outcomes and Quality

### ***Models of Care***

The key work-streams here will be

- Primary Care
- Secondary Care
- Integration

### ***Enablers***

The key work-streams here will be:

- Communications and Workforce
- Information Technology and Information Governance
- Finance and Contracting

A programme manager funded by Wirral CCG and Wirral Metropolitan Borough Council will provide support and coordination to the programme board and work-streams. The work-streams will report progress to the Vision 2018 Programme Board on a monthly basis.

In addition, the existing Wirral Strategic Commissioning Group will provide reports to the Vision 2018 Programme Board

## **Governance and Accountability**

The Vision 2018 Group will hold the work-streams identified above to account for delivery of key objectives. As Chair of the Group, the Chief Clinical Officer of NHS Wirral Clinical Commissioning Group will assess progress and endeavour to address any delivery issues. The Vision 2018 Group will report its progress to Health and Well Being Board.

The members of the group, through this Memorandum of Understanding, will also hold each other to account for delivery of agreed objectives and ensuring each partner contributes appropriately to overall vision and aims.

## Role of Members

The members of the Vision 2018 Group will be of senior level within their respective organisations and have the ability to make decisions and escalate issues as appropriate. They will also ensure compliance with governance arrangements. Members will be responsible for disseminating information to and from their organisations, departments or professional groups.

## Membership

Name	Title	Organisation	Role
Abhi Mantgani	Chief Clinical Officer	CCG	Commissioner
Phil Jennings	Chair	CCG	Commissioner
Fiona Johnstone	Director of Public Health	WMBC	Commissioner
Claire Fish	Strategic Director of Families and Wellbeing	WMBC	Commissioner
Graham Hodgkinson	Director of Adult Social Services	WMBC	Commissioner
Julia Hassall	Director of Children and Young People	WMBC	Commissioner
David Allison	Chief Executive	WUTH	Provider
Evan Moore	Senior Clinician	WUTH	Provider
Simon Gilby	Chief Executive	CT	Provider
Ewen Sim	Senior Clinician	CT	Provider
Sheena Cuminsky	Chief Executive	CWP	Provider
Anushta Sivananthan	Senior Clinician	CWP	Provider
Val McGee	Service Director	CWO	Provider
John Oates	Consortia Chair	CCG	Primary Care/Provider
Pete Naylor	Consortia Chair	CCG	Primary Care/Provider
Mark Green	Consortia Chair	CCG	Primary Care/Provider
Moira Dumma/Andrew Crawshaw	Area Team Director	AT	Commissioner
Russ Favager	Area Team Director of Finance	AT	Commissioner



In cases where members cannot attend for a single meeting, a deputy would be permissible but only in an observing capacity and will not be able to commit decisions on behalf of their organisation. Where a deputy is proposed on a longer terms basis, this must be agreed with the Chair and have suitable delegated authority to act on behalf of their organisation.

Additional members will be invited as and when required.

### **Frequency of Meetings**

Twice Monthly (to be reviewed after 6 months)

### **Communication and Accountability Arrangements**

Members will retain accountability to their respective organisational governance arrangements, but with maximum levels of delegated authority from their respective organisations

### **Resources**

In terms of publicity, engagement and other activities related to Vision 2018, member organisations should be prepared to contribute financial resources on an equitable on-going basis as details arise. In addition, partner organisations will be expected to provide resource to enable members to attend and will not be reimbursed additionally.

### **Chair/Vice Chair**

Chief Clinical Officer, NHS Wirral CCG, will be the Chair of the Vision 2018 Group.

Strategic Director of Families and Wellbeing, Wirral Metropolitan Borough Council, will be the Vice Chair of the Vision 2018 Group.

### **Quorum**

3 Commissioners and 3 Providers

### **Date of Ratification/Date of Review**

First draft: 14.11.13

Final Draft:

Date of approval:

Date for review:

