

HARINGEY WELL-BEING PARTNERSHIP BOARD

DRAFT TERMS OF REFERENCE August 2006

The **Haringey Well-being Partnership Board** is a strategic body forming part of the Haringey Strategic Partnership (HSP). As such, it aims to deliver outcomes for the priorities agreed across the HSP through the Community Strategy, which are to:

- Improve services
- Narrow the gap between the east and the west of Haringey
- Create safer communities
- Improve the environment
- Raise achievement in education and create opportunities for life long success

The Haringey Well-being Partnership Board also meets the requirements of the Health Act 1999 which specifies a formal duty of partnership between health organisations and local authorities. It is subject to government policy guidance and directives.

The Board is the umbrella body to statutory and non-statutory partnerships and sub-groups that fall within its remit.

Aims

- To improve the health and quality of life of people who live and work in Haringey and to reduce health inequalities
- To set a strategic framework, including values and principles, through which joint priorities can be delivered and through which statutory responsibilities can be carried out
- To agree joint, overarching priorities for the wide Well-being agenda through an annual statement which will guide the work of the Board in the light of the most recent information and developments

Core business

The Haringey Well-Being Partnership Board will:

- Carry out all statutory duties required by government including formally approving Section 31 partnership agreements and confirming the statutory transfer of funds between agencies
- To respond, as a partnership, to new government initiatives, directives and legislation
- Contribute to the implementation and review of the Community and Neighbourhood Renewal Strategies and to monitor progress on agreed actions
- Monitor the implementation of major projects delegated to the Well-being Executive or sub groups
- Consider, comment on and endorse, as appropriate, strategic documents from other Partnership Boards or sub groups in the Well-being or wider HSP structure that require a joint multi-agency Well-being response

- Monitor the effectiveness of the Partnership Boards and sub groups and other joint planning arrangements within its structure through receipt of an annual report or other agreed mechanisms
- Actively engage service users and stakeholders, with specific emphasis on traditionally hard to reach groups, and give support (including revenue support where appropriate) to enable participation from all relevant stakeholders
- Actively encourage the contribution of all Local Authority and NHS services and other stakeholders to the wider Well-being agenda, e.g. leisure, environment, housing, community safety, regeneration, education, children's services, and to ensure that Well-being activities are appropriately considered in their planning, including other HSP theme partnerships
- Share information, best practice and experience
- Share performance management frameworks where appropriate and possible
- Integrate, wherever appropriate, the plans and services of partner organisations including the use of Health Act 1999 flexibilities
- Account for actions and performance through regular reports to the HSP

Operational Protocols

Membership

The Membership of the Well-being Partnership Board will:

- Be related to the agreed role of the Partnership with the flexibility to co-opt members for a specified time to meet specific requirements
- Be reviewed annually
- Have the authority and resources to meet the aims and objectives of the Terms of Reference
- Possess the relevant expertise to deliver the Terms of Reference
- Be responsible for disseminating decisions and actions back to their own organisation and ensuring compliance
- Will nominate a member to represent it on the HSP Board

Chair

Members of the board will elect a chair from among their members. This will be at the host meeting each year. The Chair can serve for a maximum of three years.

Vice Chair

Members of the board will elect a vice-chair from among their members. This will be at the host meeting each year. The Vice-Chair can serve for a maximum of three years.

Representatives

Partner bodies are responsible for ensuring that they are represented at an appropriate level. Where the nominated representative is unable to attend, a deputy may attend in their place

Co-opting

The Partnership may co-opt additional members by agreement who will be the full voting members of the Board

Agency	Number of representatives
Local Authority	9
Haringey Teaching Primary Care Trust	6
North Middlesex University Hospital NHS Trust	1
Whittington Hospital NHS Trust	1
Barnet Enfield and Haringey Mental Health Trust	1
HAVCO (Voluntary Sector)	2
HarCEN	2
Metropolitan Police Service	1
?? New Name?? London Probation Service????	1
College of North East London	1
TOTAL	25

Sub-Groups of the Haringey Well-Being Partnership Board

The Board will be supported by subsidiary bodies known as the Executive as follows:

Executive/sub body	Chair
• Older Peoples Partnership	Mary Hennigan - Assistant Director, Older Peoples Services, Social Services, LBH
• Mental Health	Helen Brown – Director of Operations, TPCT
• Supporting People Management Board	Julian Higson - Assistant Director, Housing Strategy, LBH
• Healthier Communities	Ann-Marie Connolly – Director of Health Improvement, TPCT
• Housing Executive	Julian Higson - Assistant Director, Housing Strategy, LBH
• Performance and Strategy Group	Eve Pelekanos – Head of Improvement & Performance & Strategy, LBH
• Joint Service Priorities Group	Harry Turner – Director of Procurement & Finance, TPCT

Other sub-bodies may be established by the Board as it evolves.

Meetings

- Meetings will be held 4 times a year with additional, special meetings if required
- A meeting of the Well-being Partnership Board will be considered quorate when at least six members are present, providing that two representatives each of The Council and The Teaching Primary Care Trust, including the following, are in attendance:
 - one Councillor, Haringey Council
 - one Non Executive Director, Haringey NHS Teaching Primary Care Trust
- Attendance by non-members is at the invitation of the Chair.
- The agenda, papers and minutes of meetings will be available to the public

Agendas

Agendas and reports will be circulated at least five working days before the meeting. Additional late items will be at the discretion of the chair.

Partner Action

Representatives will provide a link with their own organisation regarding reporting back and instigating partner action.

Interest

Members must declare and personal and/or pecuniary interests with respect to agenda items and must not take part in any decision required with respect to these items.

Absence

If a representative is absent for three consecutive meetings the organisation/sector will be asked to re-appoint/confirm its commitment to the partnership.