

# WELL-BEING PARTNERSHIP BOARD (WBPB)

## *DRAFT TERMS OF REFERENCE*

Revised version for discussion and agreement by the WBPB on  
22 October 2007

### 1. Purpose

Local residents, statutory, voluntary, community and commercial organisations all have a role to play in improving well-being. This includes access to health and care services; access to appropriate leisure and educational services; access to employment; and opportunities for a healthier lifestyle.

Haringey's **Well-being Partnership Board** (WBPB) will lead in promoting and delivering a Healthier Haringey by:

- improving the health and quality of life of people who live and work in Haringey and reducing health inequalities
- setting a strategic framework, including outcomes and objectives, through which joint priorities can be delivered and through which statutory responsibilities can be carried out
- agreeing joint, overarching priorities for the wider 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

### 2. Rationale

The WBPB is a strategic body forming part of the Haringey Strategic Partnership (HSP). The HSP has established six priority outcomes which are set out in the Sustainable Community Strategy. The WBPB contributes to all six outcomes and has adopted them as its priorities:

Sustainable Community Strategy Priorities	Well-being Partnership Board Outcomes
People at the heart of change	Improved quality of life Making a positive contribution Freedom from discrimination or harassment Maintaining personal dignity and respect
An environmentally sustainable future	Improved quality of life Economic well-being
Economic vitality and prosperity shared by all	Improved quality of life Economic well-being
Safer for all	Improved quality of life Freedom from discrimination or harassment
Healthier people with a better quality of life	Improved health and emotional well-being Improved quality of life Increased choice and control Freedom from discrimination or harassment Maintaining personal dignity and respect
Be people and customer focused	Making a positive contribution

The WBPB will address the need to:

- shift from the narrow focus of treating illness to promotion of the broader concept of well-being, in line with the requirements of the Department of Health's 2006 White Paper *Our Health, Our Care, Our Say*
- create a sustainable framework for local action on health and well-being, so that partnership working is strengthened and there is greater clarity over who is responsible for agreeing and delivering local health and well-being targets, in line with the requirements of the Department for Communities and Local Government's 2006 White Paper, *Strong and Prosperous Communities* and the associated Local Government Involvement in Public Health Bill.

The WBPB 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.

### 3. Outcomes, objectives and targets

<b>Our Health, Our Care, Our Say (OHOCOS) Outcome</b>	<b>WBPB Objective</b>	<b>Key Performance Indicators</b>
Improved health and emotional well-being	To promote healthy living and reduce health inequalities in Haringey	<ul style="list-style-type: none"> <li>• Reduce health inequalities between the local authority area (Haringey) and the England population by narrowing the gap in age, all-cause mortality (LAA Target)</li> <li>• Increase physical activity in the borough (LAA Target)</li> <li>• Increase the number of smoking quitters in N17 (LAA Target)</li> <li>• Clients receiving a review (PAF D40)</li> <li>• Support the reduction of housing related delayed discharges from hospital as part of the Joint Mental Health Strategy 2005-08 (LAA)</li> </ul>
Improved quality of life	To promote opportunities for leisure, socialising and life long learning, and to ensure that people are able to get out and about and feel safe and confident inside and outside their homes	<ul style="list-style-type: none"> <li>• Increasing the number of older people attending day opportunities programmes (LAA Target)</li> <li>• The number of physical visits per 1000 population to public libraries (CPA C2c PLSS 6)</li> <li>• Increase adult education take-up</li> <li>• The percentage of items of equipment and adaptations delivered within 7 working days (BVPI 56)</li> <li>• The number of those aged 18 and over helped to live at home (PAF C29; C30; C31; C32)</li> <li>• Increase the number of breaks received by carers (LAA Target)</li> <li>• Reduce the proportion of adults saying they are in fear of being a victim of crime (LAA Target)</li> <li>• Households receiving intensive homecare per 1,000 population (PAF C28 BVPI 53)</li> </ul>
Making positive contribution	To encourage opportunities for active living including getting involved, influencing decisions and volunteering	<ul style="list-style-type: none"> <li>• Increase the number of people recorded as or reporting that they have engaged in formal volunteering on an average of at least two hours per week over the past year (LAA Target)</li> <li>• Increase the number of volunteers recruited as part of day opportunities for older people (LAA Target)</li> </ul>
Increased choice and control	To enable people to live independently, exercising choice and control over their lives	<ul style="list-style-type: none"> <li>• The number of adults and older people receiving direct payments at 31 March per 100,000 population aged 18 or over (PAF C51)</li> <li>• Acceptable waiting times for assessments (PAF D55 BVPI 56)</li> <li>• Acceptable waiting times for care packages (PAF D56 BVPI 196)</li> <li>• Increasing the proportion of vulnerable single people supported to live independently, who as a result do not need to be accepted as homeless and enter temporary accommodation (LAA Target)</li> </ul>

### 3. Outcomes, objectives and targets

<b>Our Health, Our Care, Our Say (OHOCOS) Outcome</b>	<b>WBPB Objective</b>	<b>Key Performance Indicators</b>
Freedom from discrimination or harassment	To ensure equitable access to services and freedom from discrimination or harassment	<ul style="list-style-type: none"> <li>• Percentage of adults assessed in the year whose ethnicity was 'not stated' in RAP return A6 (key threshold)</li> <li>• Percentage of adults with one or more services in the year whose ethnicity was 'not stated' in RAP return P4 (key threshold)</li> </ul>
Economic well-being	To create opportunities for employment and to enable people to maximise their income and secure accommodation which meets their needs	<ul style="list-style-type: none"> <li>• Increase the number of residents on Incapacity Benefit for 6 months or more helped into work of 16 hours per week or more for at least 13 weeks (LAA Target)</li> <li>• Increase the number of people from priority neighbourhoods helped into sustained work (LAA Target)</li> <li>• Improve living conditions for vulnerable people ensuring that housing is made decent, energy efficient and safe (LAA Target)</li> </ul>
Maintaining personal dignity and respect	To ensure good quality, culturally appropriate personal care and prevent abuse of service users occurring wherever possible and to deal with it appropriately and effectively if it does occur	<ul style="list-style-type: none"> <li>• Availability of single rooms (PAF D37)</li> <li>• Numbers of relevant staff in post who have had training in addressing work with vulnerable adults.</li> <li>• Written guidance on personal and/or sexual relationships between people who use in-house or purchased care services</li> </ul>

## 4. Core business

The WBPB 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
- 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 and review our overarching Well-being Strategic Framework (WBSF) based on the seven *Our Health, Our Care, Our Say* (OHOCOS) outcomes to help us shift from the narrow focus of treating illness and providing care to vulnerable people and towards the promotion of well-being for all
- Work with the other local thematic partnerships to champion the priorities of the WBSF, and to ensure there is joint ownership and delivery of the framework
- Agree the structure and terms of reference of sub groups and Partnership Board falling within the well-being structure
- Monitor the implementation of projects delegated to the well-being 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
- Monitor progress on Local Area Agreement (LAA) targets
- Refresh and agree future LAA targets and priorities in line with the Sustainable Community Strategy and the WBSF
- Actively engage service users and carers, with specific emphasis on traditionally hard to reach groups, and give support to enable participation from all relevant stakeholders
- Actively encourage the contribution of all stakeholders to the wider well-being agenda, e.g. leisure, environment, housing, community safety, regeneration, education and children's services, ensuring 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 via the joint commissioning group which manages finance and performance of the WBPB

## 5. 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**

The WBPB will select a chair from either Haringey Council or Haringey Teaching Primary Care Trust – on rotation - to serve for a maximum of three years. The individual can change within the three-year period. After serving the maximum three years of service, there must be a gap before that same individual can serve in the same capacity again.

## **Vice Chair**

The WBPB will elect a vice chair from either Haringey Council or Haringey Teaching Primary Care Trust – whichever is not currently providing the chair – to serve for a maximum of three years. The individual can change within the three-year period. After serving the maximum three years of service, there must be a gap before that same individual can serve in the same capacity again.

The appointment of the chair and vice chair will be reviewed on an annual basis.

## **Deputies and representation**

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.

## WBPB Membership

Agency	Number of representatives
Local Authority to include representatives from: Urban Environment, Safer Communities, Children and Young People and Adult, Culture and Community Services	9
Haringey Teaching Primary Care Trust (HTPCT)	6
North Middlesex University Hospital NHS Trust	1
Whittington Hospital NHS Trust	1
Barnet, Enfield and Haringey Mental Health Trust	1
Haringey Association of Voluntary and Community Organisations (HAVCO)	2
Haringey Police	1
Haringey Probation	1
College of North East London	1
Voluntary/Community sector representative	1
<b>TOTAL</b>	<b>24</b>

### Well-being Chairs Executive (WBCE)

The WBPB is supported by an executive group consisting of the Chief Executive of the HTPCT, the Director of Adult, Culture and Community Services of Haringey Council, chairs of sub groups, as outlined below, and policy support. The WBCE meets monthly and its responsibilities include:

- agenda setting for the quarterly WBPB which will then be agreed by the chair and vice chair of the WBPB
- finance and performance management of the WBPB sub groups.

### Sub Groups of the Haringey Well-being Partnership Board

The WBPB and the WBCE will be supported by subsidiary bodies known as outcome-focused sub groups and a joint commissioning group with responsibility for finance and performance.

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

### Meetings

- Meetings will be held four 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 Teaching Primary Care Trust
- Attendance by non-members is at the invitation of the chair
- The agendas, papers and notes will be made available to members of the public when requested, but meetings will not be considered as public meetings
- Members will elect a chair and vice chair from Haringey Council and Haringey Teaching Primary Care Trust – on rotation – to serve for a maximum of three years
- Members will develop and agree protocols for the conduct of members and meetings

These representatives are responsible for disseminating decisions and actions required back to their own organisation, ensuring compliance with any actions required and reporting back progress to the HSP.

### **Agendas**

Agendas and reports will be circulated at least five working days before the meeting, after the agenda has been agreed by the chair and vice chair. 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 any 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.