

Bristol Health and Wellbeing Board

Terms of Reference

1 Objective/Purpose

The Health and Wellbeing Board (HWB) will be a genuine system leadership partnership, with clarity of purpose and an overview of the health and wellbeing landscape in Bristol. Members will develop an in-depth and longer term place perspective, focusing on the wider (social) determinants of health, which will enable a reduction in health inequalities, whilst providing a strategic framework for the immediate and more narrowly focused activity that must continue in the shorter term.

2 Accountability

See governance structure (appendix A).

- The Health and Wellbeing Board is a statutory body which is constituted as a partnership forum.
- The Health and Wellbeing Board will be a committee of the Local Authority.
- The Health and Wellbeing Board will be closely affiliated with the other One City Plan Boards.
- All members of the Health and Wellbeing Board will have voting rights.
- If the Health and Wellbeing Board appoints additional members to the Board, the Board itself will determine whether those members will have voting rights.

3 Membership

The Membership of the Board shall be as follows:

- a. at least one elected member, nominated by the elected mayor or executive leader,
- b. the director of adult social services,
- c. the director of children's services,
- d. the director of public health,
- e. a representative of the Local Healthwatch,
- f. a representative of each relevant clinical commissioning group, and
- g. such other persons, or their representatives as deemed appropriate by a majority of the Board.
- h. The political requirements set out in sections 15, 16 and schedule 1 of the Local Government and Housing Act 1989 shall not apply to the membership of the Board.

Code of Conduct and Declaration of Interest

All members of the Board will be bound by the Council's code of conduct for members and will complete the register of interests.

Role Title	Organisation	Name
Cabinet Member	Bristol City Council	Cllr Helen Holland (Co Chair)
Area Director	BNSSG Clinical Commissioning Group	David Jarrett (Interim Co Chair)
Cabinet Member	Bristol City Council	Cllr Asher Craig (Deputy Chair)
(Interim) Executive Director of People (DCS & DASS)	Bristol City Council	Hugh Evans
Director of Public Health	Bristol City Council	Christina Gray
Chief Executive	BNSSG Clinical Commissioning Group	Julia Ross
TBC	Voscur Representative	TBC
Area Manager	Healthwatch	Vicky Marriott
Chief Executive	Carer's Support Centre	Tim Poole
Chief Executive	University Hospitals Bristol NHS Foundation Trust	Robert Woolley
Chief Executive	North Bristol NHS Trust	Evelyn Barker
Chief Executive	Sirona Health and Care	Janet Rowse
Clinical Director	Avon and Wiltshire MH Trust	Eva Dietrich
Chair	BAME Mental Health Network	Jean Smith
TBC	Commission on Race Equality	TBC
In Attendance		
Secretariat	Bristol City Council Democratic Services	Jeremy Livitt
Consultant in Public Health	Bristol City Council	Sally Hogg
Senior Public Health Specialist	Bristol City Council	Mark Allen (Support Officer)

There is an expectation that Board members will come fully prepared for each meeting having read the papers.

Membership of the HWB will be reviewed on a regular basis to ensure it reflects the emerging role and priorities of the Board.

4 Frequency of meetings and quoracy

The board will meet formally 6 times a year. There will be 6 additional informal discussion/workshop sessions each year which may be themed to address the HWBs vision and priorities. Theme 'experts' may be invited to join these sessions.

There is an expectation that Board members will prioritise attendance. If a member is unable to attend the meeting they should nominate a substitute. This substitute should have delegated authority to make the same level of decision as the member they are representing.

5 Responsibilities

The Health and Wellbeing Board will:

- Focus on prevention and place, exerting leadership across the council, place, and the health and care system, including member's individual organisations, to embed the Marmot (2010) objectives.
- Lead and deliver the health and wellbeing thematic vision of the One City Plan (which will function as the Board's 'Joint Health and Wellbeing Strategy').
- Provide challenge to other boards across the city that have a direct influence on the social determinants of care, e.g. homes, skills, inclusive growth, etc. and form a clear 'offer and ask' to the city, as part of the One City Plan.
- Develop and promote a city voice for health and wellbeing which is able to influence beyond our organisational and city boundaries, including national government bodies and policy.
- Ensure a Bristol focus for health and wellbeing, whilst developing the capacity to work and flex between geographies, including West of England Combined Authority (WECA), Healthier Together, BNSSG Clinical Commissioning Group (CCG), Local Enterprise Partnership.
- The HWB will be accountable for, and provide proactive support and challenge to key priority areas, e.g. Mental Health (Thrive), the obesogenic environment and alcohol misuse.
- Agree and produce a revised Pharmaceutical Needs Assessments as required and prepare a statement of the needs for pharmaceutical services of the local population.
- It will also receive regular reports from its underpinning groups (see Appendix A).

- Will liaise with and hold joint Health and Wellbeing Boards with South Gloucestershire and North Somerset 3 times a year.
- The Director of Public Health will shape the development of the HWB and its programme and act as a 'system translator' to enable health and local government colleagues to collaborate more effectively together.

6 Administration

- Business support for the functioning of the Board will be provided by Bristol City Council Public Health Service and Democratic Services.
- Meeting schedules will be published with a forward plan in line with Bristol City Council's Constitution.
- Papers must be published in line with Bristol City Council's constitution. Papers cannot be tabled except in an 'emergency situation' as agreed with the joint chairs.
- As the Board only meets for 6 times per year it is essential that agenda items are selected for consideration based on the essential criteria of 'additionality' (that only the HWB can deal with this issue) and relevance to Board priorities. This is to prevent the agenda being clogged up with business that could be dealt with, more effectively, elsewhere.
- Board papers will be submitted by the required deadline using the HWB Report Template so it is clear to Board members what action is required of them in relation to that item.

Appendix A: Governance Structure

