

**BARNSELY'S HEALTH AND WELLBEING BOARD**  
**Joint Strategic Planning and Commissioning Group**  
**DRAFT TERMS OF REFERENCE**

September 2013

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**The Health and Wellbeing Board vision is:-**

***“Barnsley residents, throughout the Borough, lead healthy, safe and fulfilling lives, and are able to identify, access, direct and manage their individual health and wellbeing needs, support their families and communities and live healthy and independent lifestyles.”***

**Principal Objectives of the Group:**

- To develop whole systems strategic planning and value for money commissioning proposals aimed at improving health and wellbeing outcomes in Barnsley based on the strategic intentions of the Health and Wellbeing Strategy and the Joint Strategic Needs Assessment (JSNA).
- To develop a joint commissioning strategy, receive assurance that commissioning priorities agreed by the Health and Wellbeing Board are being delivered and to monitor and evaluate progress.
- To reduce health inequalities through universal, targeted and evidence based commissioning to support the health and wellbeing improvement in Barnsley.
- To provide strategic leadership on commissioning strategies for Barnsley and ensure connectivity with other commissioning strategies in the Borough.
- To offer commissioning intelligence in order to inform the strategic direction of the Health and Wellbeing Board and wider whole systems transformation.
- To evaluate the success of commissioning strategies and to identify areas for investment and disinvestment across the whole system.

**Principal Responsibilities of the Group:**

- To develop value for money commissioning proposals based on the priorities identified within the Health and Wellbeing Strategy and JSNA and, where appropriate, present to the Health and Wellbeing Board for approval.
- Work alongside other partnerships and partner agencies in order to maximise opportunities for the best use of resources and the alignment/ pooling of resources where possible.
- To implement whole systems integration and partnership through the joining up of strategic planning and commissioning plans across the

NHS, Social Care and Public Health, including Children and Young People's Services.

- To ensure monitoring and evaluation of statutory functions is undertaken as well as ensuring commissioning decisions are implemented.
- To ensure that, wherever possible, proposals identified are based on the needs of the local people and communities and are evidence based, commissioning value for money services to deliver improved health and wellbeing outcomes.
- To be responsible for and be held to account for the investment of resources aimed at improving health and wellbeing outcomes under the banner of the Health and Wellbeing Board.

### **Other Responsibilities:**

- Work with other established Commissioning Groups as appropriate, across the Health and Wellbeing Board and community.
- Work alongside the Senior Strategic Development Group and other sub groups of the Health and Wellbeing Board to monitor performance against an agreed performance framework.
- Inform the development of the Joint Strategic Needs Assessment (JSNA) and other forms of needs assessments and the Health and Wellbeing Strategy.
- Development of a commissioning model and plan, including the alignment and pooling of budgets where appropriate.
- Advise on the commissioning priorities and performance frameworks for service providers.
- Report back to the Health and Wellbeing Board on the delivery of health and wellbeing service commissioning and procurement priorities and maximising of joint commissioning and delivery across partner agencies.

### **Chair**

The Chair will be ***tbc*** and the Vice Chair will be ***tbc***. The chair and the vice chair will be nominated on an annual basis.

### **Meetings**

Meetings of the Group will be bimonthly. The Chair may call extra meetings as required throughout the course of the year.

All members will prepare for meetings by reading through agenda and papers and preparing written reports as appropriate.

All members to endeavour to attend all meetings. An alternative representative should attend meetings in the absence of the main representative. Named alternates should be kept appropriately briefed and carry suitable authority to participate in the business of the meeting, including making decisions.

Additional officers from the Council and partner agencies will attend meetings on an ad hoc basis to present specific reports.

Where neither the member nor substitute member is able to attend apologies are to be sent to the Chair in advance of the meeting.

The quorum for the meeting will be one quarter of the membership including at least one Council representative and one representative of the Clinical Commissioning Group.

Agendas will be agreed by the Chair with minutes approved at the following meeting.

Plain English will be used in preparing all working documents.

Members can request the inclusion of items for future meetings by contacting the Chair or **tbc** no later than three weeks before the meeting in question.

### **Agendas and Minutes**

The agenda will be decided by the Chair. All meetings shall be in private unless the group decide otherwise.

Papers relating to agenda items must be forwarded to **tbc** at least 10 working days before the meeting for tabling.

The agenda and associated papers will be sent out a minimum of one week (five clear working days) in advance of the meeting.

In addition to members of the group, the minutes will be forwarded to members of the Health and Wellbeing Board where appropriate.

### **Administration Responsibilities**

Administrative support will be provided by **tbc** including the minuting of meetings and the circulation of agendas and papers.

### **Decision Making and Responsibility to Undertake Actions**

Decisions will be reached by consensus. If this is not possible there will be a vote. The Chair will have the casting vote in the case of a tie.

The minutes of meetings will clearly record decisions made and responsibilities for undertaking agreed tasks/actions.

## MEMBERS OF THE GROUP

### Post Organisation

### Post Holder

Barnsley MBC:-

- ED Adults and Communities (ACD)
- ED Children, YP and Families
- Director of Public Health
- Finance Manager, ACD

Martin Farran  
Rachel Dickinson  
Sharon Stoltz  
Mark Wood

NHS Barnsley Clinical Commissioning Group:-

- Chief Officer
- Chief Finance Officer

Mark Wilkinson  
Cheryl Hobson

South Yorkshire and Bassetlaw Local Area Team:-

- *tbc*

Barnsley and District Hospital NHS Foundation Trust:-

- *tbc*

South West Yorkshire Partnership Foundation Trust:-

- *tbc*

South Yorkshire Police:-

- *tbc*

Healthwatch:-

- *tbc*

### Review

The terms of reference for the group will be reviewed on a 12 monthly basis or as and when required.

# BARNSLEY'S HEALTH AND WELLBEING BOARD

## Provider Forum

### DRAFT TERMS OF REFERENCE

September 2013

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The Health and Wellbeing Board vision is:-

***“Barnsley residents, throughout the Borough, lead healthy, safe and fulfilling lives, and are able to identify, access, direct and manage their individual health and wellbeing needs, support their families and communities and live healthy and independent lifestyles.”***

#### **Purpose of the Group**

The purpose of the provider forum is to enable effective communication and engagement between organisations providing Health and Social Care Services and the Health and Wellbeing Board in Barnsley.

#### **Objectives of the Group**

The objectives of the Provider Forum are:-

1. To inform organisations working within the Borough of the current and future operational, commissioning and strategic plans of the Barnsley Health and Wellbeing Board.
2. To provide support, information and guidance to enable providers to meet the changing expectations of service delivery on behalf of the Barnsley Health and Wellbeing Board.
3. To support organisations to deliver their business in ways that meet the growing demand for directly purchased services from health and social care users and those that fund their own care, ensuring services are seamless.
4. To improve knowledge of particular areas of interest and promote opportunities for partnership and collaborative working in order to support the development of the local health and social care market.
5. To offer occasions for organisations to network and share their current activities and discuss the challenges they face.
6. To act as a mechanism for consultation.
7. To enable providers to share good practice.
8. To provide an opportunity for commissioners to meet and engage with providers.

## **Membership and Role of Members**

Membership is open to representatives from any voluntary or third sector, independent, private or statutory agencies delivering health, housing or social care services within the locality. In addition, the provider forum will be opened up to representatives from other stakeholder groups such as leisure and the Police.

Work will be undertaken to expand membership to the forum to ensure that all areas of health, housing and social care are represented.

The Chair will be agreed at the first meeting.

### **Role of Members**

To support the development of strategies that reflect service improvement according to locally identified need.

Advise on Commissioner identified local priorities and national initiatives that need to be met and propose solutions to meet them in the most cost effective manner in line with value for money principles.

Support the delivery of the Health and Wellbeing Strategy and raise concerns through the appropriate channels where it feels that the strategy is not being applied.

Contribute to the development of Commissioner proposals for service models and care pathways/networks that could deliver better services.

Work in partnership with stakeholders to ensure that services are developed in line with the H&WB Strategy and the strategic direction of the Health and Wellbeing Board.

Look at new ideas and proposals for developments which are backed by clinical and service user/carers evidence.

### **Frequency and Location of Meetings**

Forum meetings will be held on a quarterly basis and will be held in accessible venues within the Borough. These will be determined by those administering the meetings and the membership of the forum.

In addition to the regular Forums, smaller subgroup meetings may on occasions take place to cover specific subject areas or to bring together providers across the Borough who work in the same field. It is anticipated that these will run on a 'task and finish' basis, supporting communities and neighbourhoods through the Area Councils and Ward Alliances.

## **Setting the Agenda**

The following standard items will appear on the Provider Forum agenda:-

1. Welcome and Introductions
2. Health and Wellbeing Board news and updates
3. Commissioning updates
4. Provider updates and announcements
5. Agenda items for the next meeting

In addition, there will be slots for guest speakers and these slots will, where practical, be determined by forum members at the end of each meeting. Each agenda item will include time for questions and answers.

A draft agenda template is included in appendix 1.

## **Administration**

Representatives from Health and Wellbeing board will facilitate the forum and this will include:-

- Taking basic minutes and recording actions;
- Circulating minutes, agendas and papers a week prior to each meeting.

## **Review**

The usefulness and direction of the forum will be reviewed on an annual basis by members to ensure it continues to meet the needs of organisations, commissioners and the Health and Wellbeing Board.

These terms of reference will be reviewed on an annual basis or as and when required.

## **Membership**

Health and Wellbeing Provider Forum members will have specialist knowledge/ expertise/ skills/ interest in the subject area.

Membership will comprise of the following representation:-

Health and Wellbeing Board representative x 1

*See Appendix 2*

Meetings will be Chaired by a nominated representative.

In order to maintain continuity of meetings deputies who are briefed would be welcome to attend as a substitute.

The Provider Forum may at times invite individuals or groups of people to speak at meetings, these people will be named as 'attendees' and will be invited to contribute to the meeting under a specific agenda item.

**Quorum**

Whilst there is no set numbers to the Quorum, it is expected that the provider forum will not make recommendations without ensuring that the appropriate organisations/ representatives are involved in the process.

**Accountability and Reporting Arrangements**

The provider forum is accountable to the Health and Wellbeing Board and will report issues and progress on a periodical basis into the Health and Wellbeing Board.



## HEALTH AND WELLBEING BOARD PROVIDER FORUM

### AGENDA

<Insert date, time and venue>

Time	Item	
15 mins	Arrival, tea & coffee and networking	All
5 mins	Welcome and introductions (with housekeeping)	Chair
	<ul style="list-style-type: none"> <li>○ Action points arising from previous minutes</li> </ul>	
20 mins	Health and Wellbeing board updates:-	
	<ul style="list-style-type: none"> <li>○ Strategy Progress– <i>to include any day to day operational issues.</i></li> <li>○ Commissioning – <i>to include updates on procurement activity, commissioning opportunities and opportunities to influence commissioning intentions</i></li> <li>○ Clinical Commissioning Group</li> </ul>	
20 mins	Provider Updates	
	<ul style="list-style-type: none"> <li>○ <i>To give each provider an opportunity to share their own developments and activities.</i></li> </ul>	
10 mins	Break	
15 mins	Presentation slot with questions and answers	
15 mins	Presentation slot with questions and answers	
15 mins	Agenda planning for the next forum	
10 mins	Any Other Business	

**Date, time and venue of next meeting**

## Proposed Membership

### Based on overall expenditure in the Barnsley economy relating to Health and Social Care

#### Not for profit

SWYFT	(Community Services)
Barnsley Hospital Services)	(Acute and Secondary Care)
Barneslai Homes	(Housing)
Barnsley Premier Leisure	(Leisure)
Pheonix Futures	(Drug Alcohol Treatment Services)
Mencap	(Learning Disability)
South Yorkshire Housing Association	(Mental Health / Housing)
Mind	(Mental Health)
Barnsley Hospice	(Palliative Care)
Voluntary Action Barnsley	(Third Sector)
Age Concern	(Older People)
Barnsley Independent Alzhimers Society	(Older People)
Voiceability	(General)
BMBC in house services (tbc)	
Yorkshire Ambulance Service (tbc)	

#### Independent Sector

TLC Homecare
Caremark
Sun Health Care
Residential Care (tbc - from existing forum)