

# Partnerships, People and Population Health Committee



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd Prifysgol  
Betsi Cadwaladr  
University Health Board

## Terms of Reference and Operating Arrangements

### 1. INTRODUCTION

- 1.1. The Board shall establish a committee to be known as Partnerships, People and Population Health Committee (PPPH). The detailed terms of reference and operating arrangements in respect of this Committee are set out below.

### 2. PURPOSE

- 2.1. The purpose of the Committee is to provide advice and assurance to the Board with regard to the development and oversight of the Health Board's enabling strategies. The Committee will do this by ensuring that the workforce strategies are aligned and that strategic collaboration and effective partnership arrangements are in place to improve population health and reduce health inequalities.

### 3. DELEGATED POWERS

- 3.1. The Partnerships, People and Population Health Committee is required by the Board, within the remit of the Committee to:
- 3.1.1. Provide evidenced based assurance that there is compliance with The Equalities Act 2010.
    - In discharging its duty the Committee will have 'due regard' to the Public Sector Equality Duty, to eliminate discrimination, to advance equality of opportunities and foster good relations when carrying out all functions and day-to-day activities.
    - In discharging its duty the Committee will have 'due regard' to the Socio-economic Duty, to consider how strategic decisions might help reduce the inequalities associated with socio-economic disadvantage.
  - 3.1.2. Provide evidenced based assurance that BCUHB Policies are compliant with relevant legislation.
  - 3.1.3. Provide evidence based and timely advice to the Board on developing strategies.
  - 3.1.4. Provide evidence based and timely advice to the Board on the delivery of strategies including those relating to digital, people and transformation.

- 3.1.5. Oversee and provide evidence based and timely advice to the Board on relevant risks and concerns.
- 3.1.6. Provide relevant evidence based and timely advice to the Board on:
- People & Organisational Development strategy, plans and performance
  - Population health outcomes and prevention strategies.
  - Transformation capacity delivery and planning.
  - Delivery of the Corporate Strategy (improving outcomes for citizens), including in services delivered in partnership.
  - Digital Strategy Plans and Development
- 3.1.7. Receive the results of relevant audits (clinical and non-clinical) and any other relevant investigations and provide the Board with evidence based impact assessment of the implementation of the recommendations.
- 3.2. The Partnerships, People and Population Health Committee is authorised by the Board to:
- 3.2.1. Ensure that current and emerging service strategies adhere to national policy and legislation, the priorities of the Health Board and are underpinned by robust population health needs assessment, people, resourcing and financial plans and provide for sustainable futures.
- 3.2.2. Receive regular assurance reports on health and care clusters and primary care development, recognising the central role played by primary care in the delivery of health and care.
- 3.2.3. Advise and assure the Board in discharging its responsibilities with regard to the development of the Health Board's medium and long term plans, together with the Annual Operating Plan;
- 3.2.4. Ensure the Health Board's response to new and revised legislative requirements in relation to service planning and delivery, providing assurance that statutory duties will be appropriately discharged, ensuring strategic alignment between partnership plans developed with Local Authorities, Universities, third sector and other public sector organisations;
- 3.2.5. Receive regular performance and assurance reports from the Public Service Boards and Regional Partnership Board, Mental Health Partnership Board, Digital Health Care Wales (DHCW) and other key partnerships as agreed by the Board.
- 3.2.6. Ensure that the Health Board meets its duties in relation to Welsh language, civil contingencies legislation and emergency preparedness.
- 3.2.7. Ensure the alignment of supporting strategies such as People & Organisational Development, and Digital in the development of the strategic delivery plans;

- 3.2.8. Ensure that the partnership governance arrangements reflect the principles of good governance with the appropriate level of delegated authority and support to discharge their responsibilities; and monitor sources of assurances in respect of partnership matters ensuring these are sufficiently detailed to allow for specific evaluations of effectiveness including but not limited to Digital Health Care Wales.
- 3.2.9. Ensure appropriate arrangements for continuous engagement are in place; and review assurances on Consultation feedback
- 3.2.10. Monitor performance against key people indicators as part of the Quality Report;
- 3.2.11. Receive assurance reports in relation to People & Organisational Development across all staff groups including but not limited to -planning, commissioning, optimisation, education and learning, engagement & wellbeing.

#### **4. AUTHORITY**

- 4.1. The Committee may investigate or have investigated any activity (clinical and non-clinical) within its terms of reference. It may seek relevant information from any:
- Employee - and all employees are directed to cooperate with any legitimate request made by the Committee; and,
  - Other committee, sub-committee or group set up by the Board to assist it in the delivery of its functions.
- 4.2. It may also obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary, in accordance with the Board's procurement, budgetary and other requirements;
- 4.3. It may consider and where appropriate, approve on behalf of the Board any policy within the remit of the Committee's business concerning , Partnerships, People and Population Health matters.
- 4.4. It will review risks from the Board Assurance Framework and Corporate Risk Register that are assigned to the Committee by the Board and advise the Board on the appropriateness of the scoring and mitigating actions in place.

#### **5. SUB-COMMITTEES**

- 5.1. The Committee may, subject to the approval of the Health Board, establish sub-committees or task and finish groups to carry out on its behalf specific aspects of Committee Business.

## **6. MEMBERSHIP**

### **6.1. Members**

6.1.1. A minimum of three Independent Members of the Board.

### **6.2. In attendance**

- Executive Director Primary Care and Community Services (Lead Director)
- Executive Director of Workforce and Organisational Development.
- Executive Director of Public Health
- Executive Director of Therapies and Health Sciences.
- Executive Medical Director
- Executive Director of Nursing and Midwifery
- Finance Director – Strategy and Commissioning
- Director of Digital
- Director of Partnerships, Engagement and Communication

### **6.3. Right of Attendance**

6.3.1. Upon giving notice to the Committee Chair the following have the right to attend any meeting as an observer:

- Chair of the Board.
- Chair of the Audit Committee.
- Board Secretary.

### **6.4. By Invitation**

- A patient representative.
- Chair of Stakeholder Reference Group.
- A staff representative.

6.4.2. Other Directors/Officers will attend as required by the Committee Chair, as well as any others from within or outside the organisation who the Committee considers should attend, taking into account the matters under consideration at each meeting.

6.4.3. Trade Union Partners are welcome to attend the public session of the Committee

### **6.5. Member Appointments**

6.5.1. The membership of the Committee shall be determined by the Chair of the Board taking account of the balance of skills and expertise necessary to deliver the Committee's remit and subject to any specific requirements or directions made by the Welsh Government. This includes the appointment of the Chair and Vice-Chair of the Committee who shall be Independent Members.

- 6.5.2. Appointed Independent Members shall hold office on the Committee for a period of up to 4 years. Tenure of appointments will be staggered to ensure business continuity. A member may resign or be removed by the Chair of the Board. Independent Members may be reappointed up to a maximum period of 8 years.

## **6.6. Secretariat**

- 6.6.1. The Secretariat will be determined by the Board Secretary.

## **6.7. Support to Group Members**

- 6.7.1. The Board Secretary, on behalf of the Committee Chair, shall arrange the provision of advice and support to Committee members on any aspect related to the conduct of their role and ensure the provision of a programme of development for Committee members as part of the overall Board Development programme.

# **7. COMMITTEE MEETINGS**

## **7.1. Quorum**

- 7.1.1. At least two Independent Members must be present to ensure the quorum of the Committee, one of whom should be the Committee Chair or Vice-Chair. In the interests of effective governance, it is expected that a minimum of two Executive Directors will also be in attendance.

## **7.2. Frequency of Meetings**

- 7.2.1. Meetings shall normally be held bi-monthly, but may be convened at short notice if requested by the Chair.

## **7.3. Withdrawal of individuals in attendance**

- 7.3.1. The Committee may ask any or all non-board members who would normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

## **7.4. Conduct of Meetings**

- 7.4.1. Meetings may be held in person where it is safe to do so or by video-conferencing and similar technology.

# **8. RELATIONSHIP & ACCOUNTABILITIES WITH THE BOARD AND ITS COMMITTEES/GROUPS**

- 8.1. Although the Board has delegated authority to the Committee for the exercise of certain functions as set out within these terms of reference, it retains overall responsibility and accountability for ensuring the quality and

safety of healthcare for its citizens through the effective governance of the organisation.

- 8.2. The Committee is directly accountable to the Board for its performance in exercising the functions set out in these Terms of Reference,
- 8.3. The Committee, through its Chair and members, shall work closely with the Board's other Committees including joint committees/Advisory Groups to provide advice and assurance to the Board through the:
  - Joint planning and co-ordination of Board and Committee business; and
  - Sharing of information

In doing so, contributing to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall risk and assurance arrangements.

- 8.4. The Committee shall embed the corporate goals and priorities through the conduct of its business, and in doing and transacting its business shall seek assurance that adequate consideration has been given to the sustainable development principle and in meeting the requirements of the Well-Being of Future Generations Act.
- 8.5. Receive assurance and exception reports from
  - Executive Delivery Group People and Culture
  - Executive Delivery Group Transformation and Finance.
  - Population Health Group.
  - Strategic Equalities Forum
  - Risk management Group

## **9. REPORTING AND ASSURANCE ARRANGEMENTS**

9.1. The Committee Chair shall:

- 9.1.1. Report formally, regularly and on a timely basis to the Board on the Committee's activities via the Chair's assurance report and an annual report.
- 9.1.2. Ensure appropriate escalation arrangements are in place to alert the Health Board Chair, Chief Executive or Chairs of other relevant committees of any urgent/critical matters that may affect the operation and/or reputation of the Health Board.
- 9.1.3. The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self-assessment and evaluation of the Committee's performance and operation.

## **10. APPLICABILITY OF STANDING ORDERS TO COMMITTEE BUSINESS**

- 10.1. The requirements for the conduct of business as set out in the Standing Orders are equally applicable to the operation of the Committee, except in the following areas:

- Quorum

## **11. REVIEW**

- 11.1. These terms of reference and operating arrangements shall be reviewed annually by the Committee and any changes recommended to the Board for approval.

V1.04 Agreed inaugural PPPHC