

# Terms of Reference – Bradford District and Craven Health and Care Partnership - Partnership Board

## Version control

Version: 0.1 (final approved version to be 1.0)

Approved by: West Yorkshire Health and Care Integrated Care Board ICB

Date Approved: 1 July 2022

Responsible Officer: James Drury, Partnership Development Director

Date Issued: 12 July 2022

Date to be reviewed: After 1 year

## Change history

Version number	Changes applied	By	Date
0.1	Initial draft	James Drury	8 June 2022
1.0	Approved	ICB	1 July 2022
1.0	Approved	BD&C Partnership Board	12 July 2022

## Partnership Board Terms of Reference

### 1. Introduction

The Bradford District and Craven Partnership Board ('the Committee') is established as a committee of the NHS West Yorkshire Integrated Care Board (ICB), in accordance with the ICB's Constitution, Standing Orders and Scheme of Reservation and Delegation.

### 2. General

The ICB is part of the West Yorkshire Integrated Care System, which has four core purposes:

- improving population health and healthcare
- tackling unequal outcomes and access
- enhancing productivity and value for money and
- helping the NHS to support broader social and economic development

The ICS has identified a set of guiding principles that shape everything we do:

- we will be ambitious for the people we serve and the staff we employ
- the West Yorkshire partnership belongs to its citizens and to commissioners and providers, councils and NHS. We will build constructive relationships with communities, groups and organisations to tackle the wide range of issues which have an impact on health inequalities and people's health and wellbeing
- we will do the work once – duplication of systems, processes and work should be avoided as wasteful and potential source of conflict and
- we will undertake shared analysis of problems and issues as the basis of taking action.
- we will apply subsidiarity principles in all that we do – with work taking place at the appropriate level and as near to local as possible

The ICS has committed to behave consistently as leaders and colleagues in ways which model and promote our shared values, we:

- are leaders of our organisation, our place and of West Yorkshire
- support each other and work collaboratively
- act with honesty and integrity and trust each other to do the same
- challenge constructively when we need to
- assume good intentions and
- will implement our shared priorities and decisions, holding each other mutually accountable for delivery

### 3. Remit and responsibilities

The Partnership Board has no executive powers, other than those specifically delegated in these terms of reference.

The Bradford District and Craven Partnership Board will support the ICB in delivering the following statutory and/or corporate functions

Its role will be to lead the Bradford District and Craven place-based partnership in accordance with the BD&C Strategic Partnering Agreement, and in accordance with the Constitution of the West Yorkshire Integrated Care Board.

Its responsibilities are to:

- i. establish governance arrangements to support collective accountability between partner organisations for place-based system delivery and performance, underpinned by the statutory and contractual accountabilities of individual organisations
- ii. agree a plan to meet the health and healthcare needs of the population within Bradford District and Craven, having regard to the Partnership integrated care strategy and BD&C health and wellbeing strategies

- iii. allocate resources to deliver the plan in Bradford District and Craven, determining what resources should be available to meet population need and setting principles for how they should be allocated across services and providers (both revenue and capital)
- iv. arrange for the provision of health services in Bradford District and Craven in line with the resources allocated across the ICS through a range of activities including:
  - a) putting contracts and agreements in place to secure delivery of its plan by providers
  - b) convening and supporting providers (working both at scale and at place) to lead major service transformation programmes to achieve agreed outcomes
  - c) support the development of primary care networks (PCNs) as the foundations of out-of-hospital care and building blocks of place-based partnerships, including through investment in PCN management support, data and digital capabilities, workforce development and estates
  - d) working with local authority and voluntary, community and social enterprise (VCSE) sector partners to put in place personalised care for people, including assessment and provision of continuing healthcare and funded nursing care, and agreeing personal health budgets and direct payments for care
- v. approve decisions on the review, planning and procurement of primary medical care services
- vi. approve the operating structure for the BD&C place
- vii. agree implementation in place of people priorities
- viii. agree place action on data and digital: working with partners across the NHS and with local authorities to put in place smart digital and data foundations to connect health and care services to put the citizen at the centre of their care
- ix. agree joint work on estates, procurement, supply chain and commercial strategies to maximise value for money in place and support wider goals of development and sustainability

- x. develop joint working arrangements with partners in place that embed collaboration as the basis for delivery within the ICB and place plan
- xi. develop arrangements for risk sharing and /or risk pooling with other organisations (for example pooled budget arrangements under section 75 of the NHS Act 2006), for approval by the ICB Board
- xii. make arrangements to implement in place ICB risk management arrangements and
- xiii. agree implementation in place of the arrangements for complying with the NHS Provider Selection Regime

## 4. Membership

The Members of the Partnership Board are the:

- independent chair of the BD&C Partnership Board
- non-executive chair of the Finance and Performance Committee of the BD&C partnership
- non-executive chair of the Quality Committee of the BD&C Partnership
- non-executive chair of the People Committee of the BD&C Partnership
- chair of the BD&C Clinical Forum
- chair of the BD&C Citizens Forum
- BD&C Partnership Place Lead
- chair of the Clinical Advisory Board (PCNs)
- chair of the Local Medical Council
- chair of Airedale NHS FT
- chief executive of Airedale NHS FT
- chair of Bradford District Care NHS FT
- chief executive of Bradford District Care NHS FT
- chair of Bradford Teaching Hospitals NHS FT
- chief executive of Bradford Teaching Hospitals NHS FT
- chief executive of Healthwatch Bradford District
- chief executive of Healthwatch North Yorkshire

- chief executive of the City of Bradford Metropolitan District Council
- strategic director health and wellbeing of the City of Bradford Metropolitan District Council
- strategic director children of the City of Bradford Metropolitan District Council
- director of public health of the City of Bradford Metropolitan District Council
- chief executive of Craven District Council
- corporate director of North Yorkshire County Council
- director of public health of North Yorkshire County Council
- director of children's services of North Yorkshire County Council
- chief executive of Bradford Care Association
- the chief operating officer of North Yorkshire Independent Care Group
- senior representative of the VCSE sector in Bradford District and
- senior representative of the VCSE sector in Craven District

## 5. Required attendees

The following individuals will be invited to attend each meeting of the Partnership Board as attendees. Attendees attend meetings and may be invited by the Chair to participate in discussions from time to time. They do not vote. The attendees of the Partnership Board are the:

- chief operating officer of the BD&C Partnership
- director of finance, planning and performance of the BD&C Partnership
- director of partnership development of the BD&C Partnership
- assistant director of governance and assurance
- director of quality and nursing of the BD&C Partnership and
- strategic communications and stakeholder engagement Lead of the BD&C Partnership

ICB officers may request or be requested to attend the meeting when matters concerning their responsibilities are to be discussed or they are presenting a paper.

The Chair may invite such other attendees to attend any meeting of the Partnership Board as the Chair considers appropriate.

## 6. Deputies

With the permission of the Chair, members of the Partnership Board may nominate a deputy to attend a meeting that they are unable to attend. The deputy may speak and vote on their behalf. The decision of the Chair regarding authorisation of nominated deputies is final.

## 7. Chair

[See **4. Membership** for selection of the Chair]

The meetings will be run by the chair. In the event of the chair of the Partnership Board being unable to attend all or part of the meeting, another member of the Partnership Board shall chair the meeting.

## 8. Quoracy

No business shall be transacted unless at least 50% of the membership (which equates to 14 individuals) and including the following are present, the:

- independent chair or their nominated replacement as chair for the meeting
- place lead or their nominated deputy for the meeting
- Representatives of at least three of the following constituencies: NHS providers, local government, the care sector, the VCSE sector, the primary care sector

For the sake of clarity:

- a) No person can act in more than one capacity when determining the quorum.

- b) An individual who has been disqualified from participating in a discussion on any matter and/or from voting on any motion by reason of a declaration of a conflict of interest, shall no longer count towards the quorum.

Members of the Partnership Board may participate in meetings by telephone, video or by other electronic means where they are available and with the prior agreement of the Chair. Participation by any of these means shall be deemed to constitute presence in person at the meeting. Members are normally expected to attend at least 75% of meetings during the year

## 9. Conduct of meetings

In line with the ICB's Standing Orders, it is expected that decisions will be reached by consensus. Should this not be possible, each voting member of the Partnership Board will have one vote, the process for which is set out below:

- a. all members of the Partnership Board who are present at the meeting will be eligible to cast one vote each. (For the sake of clarity, members of the committee are set out at paragraph 3.1; attendees and observers do not have voting rights.)
- b. absent members may not vote by proxy. Absence is defined as not being present at the time of the vote but this does not preclude anyone attending by teleconference or other virtual mechanism from exercising their right to vote if eligible to do so
- c. a resolution will be passed if more votes are cast for the resolution than against it.
- d. if an equal number of votes are cast for and against a resolution, then the Chair (or in their absence, the person presiding over the meeting) will have a second and casting vote and
- e. Should a vote be taken, the outcome of the vote, and any dissenting views, must be recorded in the minutes of the meeting

## 10. Frequency of meetings

The Partnership Board will normally meet quarterly, but in the first year of operation will meet on a bi-monthly basis to support the development of board effectiveness. The Chair may call an additional meeting at any time by giving not less than 14 calendar days' notice in writing to members of the Partnership Board.

One third of the members of the Partnership Board may request the Chair to convene a meeting by notice in writing, specifying the matters which they wish to be considered at the meeting. If the Chair refuses, or fails, to call a meeting within seven calendar days of such a request being presented, the Partnership Board members signing the requisition may call a meeting by giving not less than 14 calendar days' notice in writing to all members of the Partnership Board specifying the matters to be considered at the meeting.

In emergency situations the Chair may call a meeting with two days' notice by setting out the reason for the urgency and the decision to be taken.

## 11. Urgent decisions

In the case of urgent decisions and extraordinary circumstances, every attempt will be made for the Partnership Board to meet virtually. Where this is not possible the following will apply the:

- a) powers which are delegated to the Partnership Board, may for an urgent decision be exercised by the Chair of the Partnership Board and the Place Lead for Bradford District and Craven and
- b) exercise of such powers shall be reported to the next formal meeting of the Partnership Board for formal ratification, where the Chair will explain the reason for the action taken, and the ICB Audit Committee for oversight.

## 12. Admissions of the press and public

Meetings of the BC&C Partnership Board will be open to the public.

The Partnership Board may resolve to exclude the public from a meeting or part of a meeting where it would be prejudicial to the public interest by reason of the confidential nature of the business to be transacted or for other special reasons stated in the resolution and arising from the nature of that business or of the proceedings or for any other reason permitted by the Public Bodies (Admission to Meetings) Act 1960 as amended or succeeded from time to time.

The chair of the meeting shall give such directions as he/she thinks fit with regard to the arrangements for meetings and accommodation of the public and representatives of the press such as to ensure that the Partnership Board's business shall be conducted without interruption and disruption.

As permitted by Section 1(8) Public Bodies (Admissions to Meetings) Act 1960 as amended from time to time) the public may be excluded from a meeting to suppress or prevent disorderly conduct or behaviour.

Matters to be dealt with by a meeting following the exclusion of representatives of the press, and other members of the public shall be confidential to the members of the Partnership Board.

A public notice of the time and place of the meeting and how to access the meeting shall be given by posting it electronically at least 7 calendar days before the meeting or, if the meeting is convened at shorter notice, then at the time it is convened.

The agenda and papers for meetings will be published electronically in advance of the meeting excluding, if thought fit, any item likely to be addressed in part of a meeting is not likely to be open to the public.

### **13. Declarations of interest**

If any member has an interest, financial or otherwise, in any matter and is present at the meeting at which the matter is under discussion, he/she will declare that interest as early as possible and act in accordance with the ICB's Conflicts of Interests Policy. Subject to any previously agreed arrangements for managing a conflict of interest, the chair of the meeting will determine how a conflict of interest should be managed. The chair of the

meeting may require the individual to withdraw from the meeting or part of it. The individual must comply with these arrangements, which must be recorded in the minutes of the meeting.

## 14. Support to the Partnership Board

The Partnership Board's lead manager is the BD&C Partnership Development Director. Administrative support will be provided to the Partnership Board by officers of the ICB. This will include:

- agreement of the agenda with the Chair in consultation with the Lead Manager, taking minutes of the meetings, keeping an accurate record of attendance, key points of the discussion, matters arising and issues to be carried forward
- maintaining an on-going list of actions, specifying members responsible, due dates and keeping track of these actions
- sending out agendas and supporting papers to members five working days before the meeting
- drafting minutes for approval by the Chair and ICB Lead Manager within five working days of the meeting and then distribute to all attendees following this approval within 10 working days and
- an annual work plan to be updated and maintained on a quarterly basis

## 15. Authority

The Partnership Board is authorised to investigate any activity within its terms of reference. It is authorised to seek any information it requires within its remit, from any employee of the ICB and they are directed to co-operate with any such request made by the Partnership Board.

The Partnership Board is authorised to commission any reports or surveys it deems necessary to help it fulfil its obligations.

The Partnership Board is authorised to obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise if it considers this is necessary. In doing, so, the Partnership Board must follow procedures put in place by the ICB for obtaining legal or professional advice.

The Partnership Board is authorised to create sub-committees or working groups as are necessary to fulfil its responsibilities within its terms of reference. The Partnership Board may not delegate executive powers delegated to it within these terms of reference (unless expressly authorised by the ICB Board) and remains accountable for the work of any such group.

## 16. Reporting

- the Partnership Board shall submit its minutes to each formal ICB Board meeting
- the Chair shall draw to the attention of the ICB Board any significant issues or risks relevant to the ICB
- the Partnership Board's minutes will be published on the ICB website once ratified
- the Partnership Board shall submit an annual report to the ICB Audit Committee and the ICB Board and
- the Partnership Board will receive for information the minutes of other meetings which are captured in the Partnership Board work plan e.g. sub-committees

## 17. Conduct of the Partnership Board

- All members will have due regard to and operate within the Constitution of the ICB, standing orders, standing financial instructions and other financial procedures
- Members must demonstrably consider the equality and diversity implications of decisions they make and consider whether any new resource allocation achieves positive change around inclusion, equality and diversity

- Members of the Partnership Board will abide by the 'Principles of Public Life' (The Nolan Principles) and the NHS Code of Conduct
- The Partnership Board shall agree an Annual Work Plan with the ICB Board
- The Partnership Board shall undertake an annual self-assessment of its own performance against the annual plan, membership and terms of reference. This self-assessment shall form the basis of the annual report from the Partnership Board.
- Any resulting changes to the terms of reference shall be submitted for approval by the ICB Board

## 18. Amendments

These terms of reference, which must be published on the ICB website, set out the remit, responsibilities, membership and reporting arrangements of this Committee (the BD&C Partnership Board) and may only be changed with the approval of the ICB Board.

## 19. Review Date

After 1 year.