

## **Appendix One:**

### **Essex Health and Wellbeing Board**

#### **Terms of Reference**

##### **Purpose:**

The Purpose of the Essex Health & Wellbeing Board (EHWB) is to play a pivotal role in all parts of Essex to enable residents to lead healthy lives in ways which extend life expectancy and minimise differences in life expectancy between places. It will do this through delivering, supporting and influencing within the complex local system.

##### **Context:**

Essex comprises about one and a half million citizens with a further 350,000 in the adjoining unitary councils of Southend and Thurrock. The population is ageing with the problems of frailty, including dementia, that that brings. There are increasing numbers of people with learning and other complex disabilities maturing into and across adulthood. Accordingly, there are increasing numbers of voluntary carers who share a similar demographic profile.

While life expectancy across the county is at or slightly above the national average, there are significant differences between areas and there is a clear inverse correlation between life expectancy and deprivation. Inequalities exist at geographical level as well between different vulnerable groups. These inequalities are driven by socioeconomic factors including income, education, employment, community safety, loneliness and housing.

The characteristics associated with unhealthy lifestyles are again in line with national averages but with significant intra-county variations and excluded groups. These include levels of obesity, physical inactivity and substance misuse. Diabetes remains a growing common ailment.

Mental illness and frailty is at least in line with national averages but there are particular concerns about levels of suicide where some districts feature among the worst effected in the country.

##### **Activities of the Board:**

The Health and Wellbeing Board is a statutory committee of Essex County Council. However, ownership of delivery and issues sits with all partners.

Given the purpose and context, the HWB will:

- Commission a joint strategic needs analysis (JSNA) from time to time as required.
- Ensure comprehensive and whole-system dialogue so that the emerging Joint health and wellbeing strategy (JHWS) has common ownership and commitment.
- Optimise and oversee delivery of the JHWS.
- Ensure whole system understanding of and commitment to the health and wellbeing agenda in key areas of influence such as economic development and employment, housing and education

- Strive for perfect communications and collaboration between all parts of the system notably ICSs, local alliances and district level Health & Wellbeing Boards
- Operate on the principle of subsidiarity recognising that strategies initiated by the EHWB should be limited to those which require a true pan-Essex focus.
- Promote the import of best practice from outside the county, and the sharing / adoption of best practice within the county.
- Provide a high-quality channel for dialogue with and feedback from residents and users, in line with the democratic accountability which local government brings to the system.

### **Way of working:**

The EHWB will focus on those areas across the county where health and wellbeing have greatest impacts, or where activities have greatest impact on health and wellbeing. For instance, healthy workforces will enable competitive advantage in retaining and bringing high-quality employment to the county while areas of high unemployment will be disadvantageous to health. The Board will wish to ensure that there is optimal system impact on all key drivers of health be they socioeconomic, lifestyle, clinical or environment related

The EHWB will operate flexibly, seeking to create the right means and groups to deliver particular elements of the strategy. Formal face-to-face meetings will be supplemented by informal sessions whether face-to-face or virtual. Subcommittees such as the Essex Strategic Co-ordination Group (ESCG) will exist alongside working groups and task-and-finish groups.

Wherever possible the HWB will wish work to be undertaken through existing partnerships and groups. New groups will only be established where there is not an existing group that could embrace that function. This might be because no such group exists or it would be impossible for that group to afford sufficient priority to the required action.

The ESCG will retain a key coordination and delivery function. The group also supports the Essex Partnership Board (EPB) which will help ensure aligned agendas. This will be further enhanced through a shared dedicated secretariat. The ESCG role will include to develop agendas and coordinate delivery, with membership that reflects the full HWB.

The HWB will work adopt a subsidiarity as a key principle. This will involve strong links with local Alliances and district/borough and city level Health and Wellbeing Boards. The importance of the District County Health and Wellbeing forum will be considered in this.

The Board recognises the key importance of user Voice and strong user and local resident input will be key to success with key roles for Healthwatch, VCS members and elected members on the Board.

The complexity of the Essex system is apparent to all. It is hard to fully capture the full nuances of how the Board will work alongside the new NHS focussed system architecture and some degree of permeability, tolerance and acknowledgement of overlaps will be required of members. Further work in particular will be needed to more specifically clarify operational working with the three ICPs.

## **Proposed Membership:**

Based on the above the membership proposed is:

- Essex County Councillors x 2 (one of who will ordinarily be Chairman of the Board): Cabinet members for Adult Social Care and Children's Services
- Essex County Council senior officers:
  - Chief Executive (or nominee)
  - Executive Director of Adult Social Care
  - Executive Director of Children's Services
  - Director of Public Health
- ICS Chairs / Chief Executives
- A lead officer and an elected member from each Alliance area ensuring a strong mix of officers and elected politicians representing local authorities and Alliances
- Provider representation: 1 x mental health, 1 x acute, 1 x community
- Each ICS to appoints a GP representative
- EALC
- Healthwatch
- Essex Police, Fire and Crime Commissioner
- Voluntary Sector x 2
- NHS East of England Regional Office

There will also be an extended membership who do not have voting rights but are regularly invited and may attend as required. This will include:

- Representative from the universities
- A data analytics practitioner
- Safeguarding Chair

The Chairs of both the Southend HWB and the Thurrock HWB will also have a standing invitation.

## **Secretariat**

- The administration of the Board will be overseen by the Equalities and Partnerships Team at Essex County Council.
- The intention will be to work with the Agenda-Setting Group to advise on and devise a clear forward plan of issues for discussion and facilitate the production of an agreed agenda and set of papers for each meeting.
- The publishing of agendas and papers, clerking of meetings and publication of actions and more detailed minutes will, as usual, be carried out by ECC's Democratic Services team.
- Actions agreed at each meeting will be circulated on the same day as the meeting.
- Minutes will then be circulated within 10 working days of the meeting.