

## Terms of Reference

### Introduction

This document sets out the ways in which the partner agencies that comprise the Ashford Health and Wellbeing Partnership (AHWP) will work together to strategically oversee the delivery of the outcomes contained within the Kent Health and Wellbeing Strategy and the developing Ashford Health and Wellbeing Strategy.

The composition of the AHWP recognises the need for a coordinated, partnership approach to addressing health and wellbeing needs and related problems across the borough.

The AHWP will ensure effective strategic planning and use of resources – including commissioning - as well as a coordinated approach to meeting statutory requirements and targets, as well as local objectives relating to health and wellbeing.

### Strategic Remit

The AHWP sits within a wider framework of partnerships. See Appendix 1 for a map of the partnership environment (*not attached for the purposes of this report*).

The Kent and Medway Joint Health and Wellbeing Board (KMJHWP) is a statutory body established by the Health and Social Care Act 2012. The Act specifies a minimum membership, which has been extended to include representation of the district councils.

The East Kent Health and Wellbeing Board (EKHWP) is a sub-regional group that feeds into the KHWP. The EKHWP:

- Ensures that the duties of the KHWP outlined above are completed and that the needs of East Kent are adequately reflected within them
- Escalate issues to the KHWP as required
- Will agree an annual sub-regional priority through a partnership framework process in order to maximise resources and synergies
- Address health and wellbeing issues that are difficult to address at a local borough level

The Chair and the lead officer of the AHWP attend the EKHWP and it is their role to ensure a two way flow of information.

### AHWP aims and objectives

The AHWP aims to:

- Improve health and wellbeing outcomes in Ashford, ensuring bespoke delivery tailored to our needs and our communities
- Ensure all partners are contributing to the agreed health and wellbeing outcomes

The AHWP has the following outcome objectives, which link directly to the Kent Joint Health and Wellbeing Strategy to ensure we play our part in the delivery of county aims:

- Giving every child the best start in life
- Effective prevention of ill health by people taking greater responsibility for their own health and wellbeing
- Quality of life for people with long term conditions is enhanced with good access to good quality care and support

- People with mental health issues are supported to live well
- People with dementia are assessed and treated earlier and supported to live well

We also have local outcome objectives as follows:

- Ensuring homes in Ashford support the health and wellbeing of our communities
- Improving our air quality and reducing deaths where Public Health England estimate that particulate air pollution is a contributory factor
- Driving behaviour change in our communities to deliver long lasting and sustainable outcomes

## Membership

The following organisations/departments/roles are represented on the AHWP:

Organisation	Position
Ashford Borough Council*	Cabinet member for community safety and wellbeing
	Head of community safety and wellbeing
	Head of culture
	Head of housing
Clinical Commissioning Group*	Director of performance and delivery
	GP representative
	Lay member - patient and public engagement
Kent Community Health Foundation Trust*	
William Harvey Hospital	
Local Care	
Partnerships	Chair of Ashford Community Safety Partnership
	Chair of Ashford Local Children's Partnership Group
Others	Addaction xxx
	Ashford College xxx

Voting partners are indicated by an \*, with one vote per partner.

Others may be invited onto the Board as required by the Chair of the AHWP.

## Membership expectations

- To have authority to be able to take action and make decisions as required
- To attend the AHWP regularly and when they cannot attend send a named deputy who has been briefed on their attendance.
- To commit to developing an appropriate level of understanding around health and wellbeing issues, policy and practice
- To offer advice on best delivery approaches using local and organisational knowledge
- To support the work of the AHWP by assisting officers to overcome any cross-organisational / barriers

## The role of the Chair

The role of the Chair is to ensure:

- The AHWP and related sub groups are delivering agreed activity as outlined in the annual action plan
- Governance, including the delivery groups and related action plans, is annually reviewed
- That we are working closely with the EKHWB and KWB as required.

## **Observers**

Individuals and organisations with known expertise and knowledge may be requested to attend meetings as observers. Observers may participate in meetings but shall have no decision-making powers. If a member would like an observer to attend a meeting, he/she should seek the permission of the Chair.

## **Quorum**

A valid quorum for meetings is half of the members with the right to be heard. This is the minimum requirement for a decision to be taken.

## **Meeting Frequency**

The AHWP will meet quarterly. The AHWP may request sub-group meetings on particular topics more frequently.

## **Urgent matters**

Decisions may be made about urgent matters without a group meeting providing the written consent of the Chair is sought and given. In this case the Chair must ensure that every effort has been made to consult informally with members and report any decisions taken at the next meeting.

## **Performance Indicators**

The AHWP will agree a number of outcome indicators to provide a performance framework to capture progress and to identify and tackle emerging issues.

## **Subgroups**

These are established as required but currently include:

- Smoking cessation task group
- Healthy weight task group

An early years' working group is in the process of being established.