DRAFT SHROPSHIRE HEALTH & WELLBEING BOARD
TERMS OF REFERENCE

1. Purpose

The Health and Wellbeing Board (HWBB) acts to ensure that key leaders from health, care, and the Voluntary and Community Sector work together to protect people's health, improve the health and wellbeing of Shropshire residents, reduce inequalities and positively influence the wider determinants of health. Health and Wellbeing Board members collaborate to understand their local community's needs, agree priorities and work together to plan how best to deliver services.

The statutory functions of the Board are set out in the Health and Social Care Act 2012:

- Prepare and publish a Joint Strategic Needs Assessment (JSNA)
- Prepare and publish a Pharmaceutical Needs Assessment every 3 years.
- Prepare and publish a Joint Local Health and Wellbeing Strategy (JLHWS) setting out how the needs identified in the JSNA will be prioritised and addressed
- Ensure effective public engagement and consultation in developing the JSNA and JLHWS.
- Promote the integration of health and social care services, including providing advice, assistance and other support in encouraging arrangements under section 75 of the NHS Act 2006.
- Approve the Better Care Fund arrangements, including section 75 agreement.
- Encourage providers to work closely with the Board and encourage those that provide health, health related or social care services in an area to work "closely together".
- Consider and report on whether ICB Commissioning Plans have taken proper account of the JLHWS. See the local government legislation page for further information. (Health & Wellbeing Boards - guidance)
- The Health and Wellbeing Board (HWBB) will provide strategic leadership, democratic oversight and partnership accountability for the development and delivery of healthy neighbourhoods including neighbourhood health and community-centred models of care within Shropshire. Working in partnership with NHS organisations, local government, the voluntary and community sector, and other stakeholders
- Population Health Improvement Plans

2. Health and Wellbeing Board Vision and Aim:

Our Vision:

A healthier Shropshire, where everyone can flourish and achieve their full potential.

Our Aim:

- To improve the health and wellbeing of the residents of Shropshire.
- To reduce health inequalities: the avoidable, unfair and systematic differences in health outcomes across the population and between different groups in society.
- To ensure prevention is at the heart of improving health and wellbeing, reducing ill health and the associated demand on health and care services.
- Provide democratic input into the Integrated Care System
- To empower our residents to take an active role in improving their own health and

wellbeing.

- The HWBB provides a forum for discussions about setting strategic direction and operational co-ordination in the delivery of services working in partnership to address health inequalities set and deliver strategies across health and care and the wider determinants of health and ensuring a prevention progress, ensuring strategies meet local need
- To support delivery of Healthy Neighbourhoods including the Neighbourhood Health Framework by strengthening integrated, place-based working across health, care, local government, voluntary and community sector partners, and communities, so that services are better coordinated around local needs and help reduce inequalities.

3. Principles of Membership and Partnership Working

To support effective partnership working and improve the health and wellbeing of Shropshire residents, members of the Health and Wellbeing Board will:

- Act in the best interests of the people of Shropshire, bringing their expertise, insight and influence while taking a whole-system perspective rather than representing organisational interests alone.
- Work collaboratively, constructively and by consensus wherever possible.
- Contribute actively to the development of the Joint Strategic Needs Assessment (JSNA) and delivery of the Joint Local Health and Wellbeing Strategy (JLHWS).
- Foster a culture of trust, respect, openness and constructive challenge to maximise the effectiveness of the Board.
- Champion the work of the Board within their organisations and support communication, engagement and stakeholder involvement activities.
- Promote transparency, ensuring that decision-making is open, informed by the views of local people, and provides opportunities for public influence and participation.
- Adopt a trauma-informed approach, embedding the principles of safety, trust, choice, collaboration, empowerment and cultural awareness.
- Be accountable for their actions and decisions to their organisations, staff, partners and the residents of Shropshire.
- Focus on delivering added value through partnership working, with a shared commitment to improving outcomes and reducing inequalities for local communities.

The Health and Wellbeing Board (HWBB) will work collaboratively across the health and wellbeing system to deliver the priorities of the Health and Wellbeing Strategy through:

- **Prevention and reducing inequalities** by promoting healthy lifestyles, improving wellbeing across the life course, and addressing the needs of communities experiencing the greatest inequalities, including seldom-heard groups.
- **Influencing the wider determinants of health** by working with partners across areas such as housing, planning, transport, health protection, economic development, and environmental sustainability.
- **Community engagement and co-production** by involving residents, service users, and communities in the development of services and ensuring that engagement informs the JSNA and decision-making processes.
- **Integration and joint commissioning** by supporting joined-up planning, commissioning, and delivery of health and social care services, ensuring quality, value for money, and improved outcomes.
- **Neighbourhood health** by providing strategic oversight of neighbourhood health plans, promoting place-based working, aligning partner priorities and resources, and monitoring

delivery and impact.

- **Partnership working and governance** by overseeing delivery through sub-groups and partner boards, including Shropshire Integrated Place Partnership (ShIPP), statutory partnerships, and other strategic forums.
- **Accountability and assurance** by acting as the principal forum for democratic and public accountability for health and wellbeing, receiving assurance on progress, outcomes, and statutory responsibilities.
- **System leadership** by working with the Integrated Care Board (ICB) and wider system partners to ensure that Shropshire's priorities and statutory responsibilities are reflected within system governance and decision-making.

4. Membership

Membership of the Health & Wellbeing Board consists of:

- Cabinet Portfolio Holder, Adult Social Care & Health (co-chair)
- Chief Nurse, NHS Shropshire, Telford and Wrekin and Staffordshire & Stoke-on-Trent (Co-chair)
- Cabinet Portfolio Holder for Children and Education
- Leader of Shropshire Council
- Executive Director (Director of Public Health), Shropshire Council
- Director for Adult Social Services (DASS), Shropshire Council
- Director of Children's Services (DCS), Shropshire Council
- Head of Service - Housing, Resettlement and Independent Living
- Lead Officer, Voluntary and Community Sector
- Chief Officer, Healthwatch Shropshire
- Chief Officer System Development and Integration, NHS STW
- Director Place for Shropshire NHS Shropshire Telford and Wrekin
- Chief Executive, Shropshire Telford and Wrekin Community and Hospital NHS Trust Group
- Group Chief Strategy and Integration Officer, Shropshire Telford & Wrekin Community and Hospitals NHS Group
- Chief Officer, Partners in Care
- CEO Robert Jones and Agnes Hunt Hospital (RJAH)
- Associate Director, Midlands Partnership Foundation Trust (MPFT)
- Co-Chair, GP Board
- Chief Officer, Community Pharmacy Shropshire
- Superintendent, West Mercia Police

5. Meetings of the Board

Meeting Frequency – The Board usually meets at least quarterly. Meetings will be held in person; however, provision will be made for online meetings in circumstances such as severe weather or pandemics. This will be agreed with the chair and co-chair.

Election, Roles and Responsibilities of the Co-Chairs

- Election – the Board will operate a co-chair arrangement selected and agreed by the Board; one Portfolio Holder HWBB Member and one Integrated Care System (ICS) HWBB member.
- Responsibilities – Represent views of the Board as required; allow views to be heard fairly and cultivate an atmosphere of true collaboration.

Notice of Meetings – meetings of the Board will be open to the press and public and arranged 5 clear working days in advance by Shropshire Council, who will also provide the clerking and recording of the meeting. Meeting dates, agendas, and minutes will be published on the Council website.

Public questions - Public questions are a standing agenda item and are welcomed, but notice of any question should be received prior to the commencement of the relevant meeting in accordance with the provisions of the Constitution of the Council for questions from the public. The agenda is published on the Council website 5 clear working days before the meeting. A response to the question will be made available on the Council website.

Confidential Items – Members of the public and press may only be excluded either in accordance with the Access to Information Rules as set out in Part 4 of Shropshire Council's Constitution or Rule 26 (Disturbance by the Public).

Substitutes – Nominating groups may appoint a substitute member for each position; notification of the named substitute member must be made prior to the meeting start. Substitute members will have full voting rights.

Disclosable Pecuniary Interests - Members will be required to disclose any pecuniary interest in any matters to be discussed that are not included in the Register of Interests and leave the meeting prior to the matter being discussed.

Agenda items – The Chair or Co-Chairs, in consultation with the Director of Public Health at Shropshire Council, will set the agenda for Health and Wellbeing Board meetings. The Council's Head of Service for Healthy Population will coordinate agenda planning and administration.

Standard items, included at the discretion of the Chair or Co-Chairs, usually include:

- *System updates*: updates from the Shropshire Integrated Place Partnership (ShIPP) including Healthy Neighbourhoods, Joint Commissioning/Better Care Fund (BCF), and Integrated Care System (ICS).
- *Population health:* JSNA updates to support a shared understanding of local community needs, informed by locally collected quantitative and qualitative evidence.
- *Joint Local Health and Wellbeing Strategy (JLHWS) reporting*: regular reports on progress against the agreed strategic priorities and key areas of focus.
- *Health protection*
- *Inequalities*

Annual reports will include updates from Healthwatch Shropshire, the Director of Public Health, the Shropshire Community Safety Partnership, the SEND and AP Board and other groups as appropriate. Other agenda items may include strategies, reports, and updates from system partners and other organisations where these are relevant to HWBB priorities and functions. This includes reports from Healthwatch Shropshire, where the Board may be asked to comment on the findings and, where appropriate, report on improvements made in response.

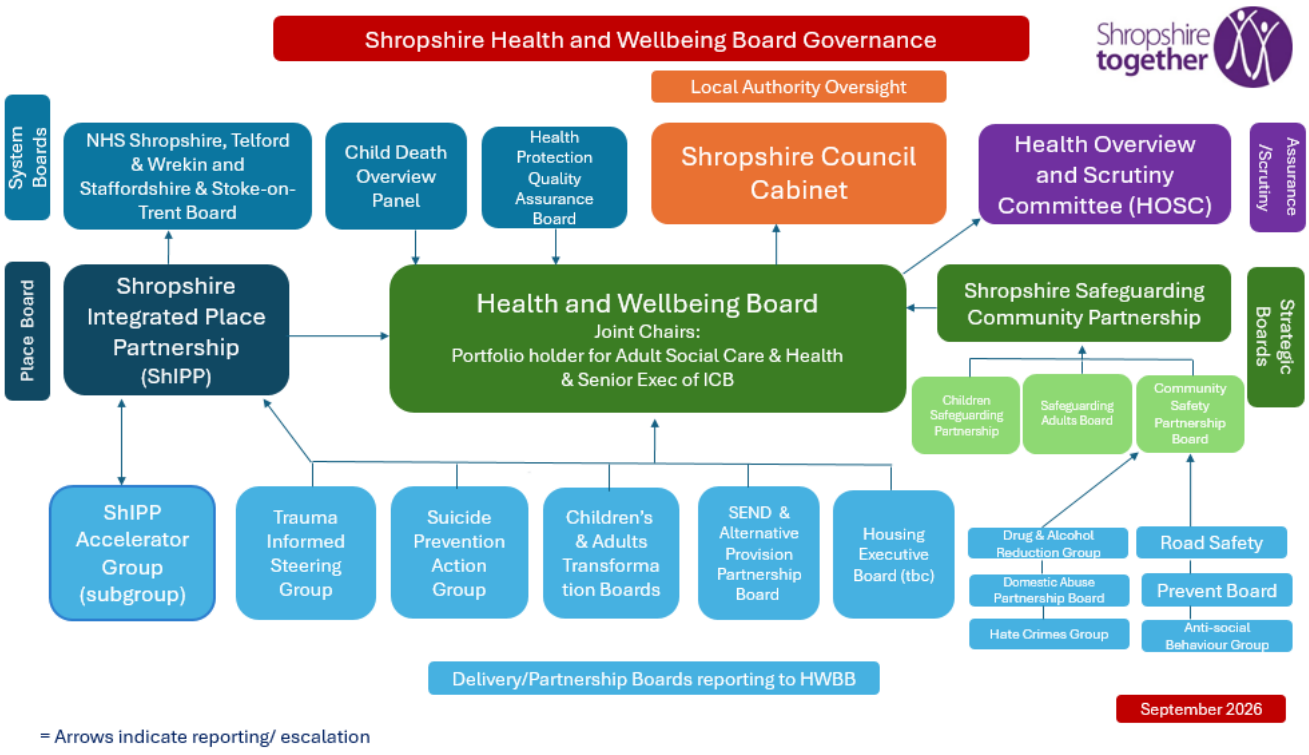
Reports for Board meetings should be submitted to the Council's Head of Service for Healthy Population at least ten working days before the meeting to allow time for preparation and publication on the Council website.

Quorum – The quorum for all Health and Wellbeing Board meetings, whether held in person or online, is one quarter of the whole number of voting members, subject to a minimum of 3. This must include at least two representatives from Shropshire Council, one representative from the Integrated Care Board, and one representative from another organisation. Members must be present in person to count towards quoracy and to vote. On-line attendees are not counted towards quoracy and cannot vote

Decision making – Decisions should be reached by consensus wherever possible. Where a vote is required, decisions will be determined by a simple majority of members present and voting. In the event of an equal vote, the Chair will have a casting vote.

6. Reporting Mechanisms/Accountability

- The Health and Wellbeing Board, as a Committee of the Council, will report to Full Council as required.
- The actions of the Health and Wellbeing Board will be subject to independent scrutiny by the relevant members of the Overview and Scrutiny Committee of the Council.
- This Governance structure is subject to change, and if updated, will be reported and added to the Council website.



7. Review date

The Terms of Reference will be reviewed annually to ensure that the Board is fit for purpose and able to respond to the changes in the way we work.
Review date: November 2027

Acknowledgement: Some additions to this ToR have been adapted from; Derbyshire County

Date	Author	Comments
November 2026	R. Robinson	Extensive re-writing including quoracy, membership and addition of healthy neighbourhood principles.