

Board Meeting
04.8.22
Open Session
Item 9
Appendix 1



NHS Grampian Population Health Committee Terms of Reference

Lead Author:

Board Secretary

Signature:

Identifier:

Reviewer:

Committee Chair

Signature:

Review Date:

Approver:

NHS Grampian
Board

Signature:

Approval Date:

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Title: Population Health Committee – Role, Remit and Membership Paper

Unique Identifier: To be confirmed

Replaces: Not applicable

Lead Author: Board Secretary

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Policy, Protocol, Procedure or Process Document: Process Document

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Revision Date	Previous Revision Date	Summary of Changes (Descriptive summary of the changes made)	Changes Marked* (Identify page numbers and section heading)

* Changes marked should detail the section(s) of the document that have been amended i.e. page number and section heading.

Document approved by:

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Signature:

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Designation:

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Date:

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POPULATION HEALTH COMMITTEE

1. Purpose

NHS Grampian's strategic intent is to create a sustainable, preventative system of health and care where NHS Grampian is a partner in enabling good health and wellbeing of the population it serves. The Eighth Decade paper has set out why our current way of working is getting harder to support the changing health care needs of our population within available resources. Whilst redesign of services is part of the solution it needs to be wider, people in the future need to be healthier than they are today. NHS Grampian has committed to redress the organisational balance of responding to ill health with investing in preventing harm, promoting wellbeing and integrating services to support communities to thrive. The Committee will focus on this ambition, to repurpose NHS Grampian as a population health focused organisation.

This will require an increase in priority given to activities, partnerships and systems which support and enable preventative approaches and reduce inequalities in health outcomes for local people. People's health and wellbeing is better when they are actively engaged in decisions about their health and care. We call this 'People Powered Health'. We recognise that, to put people and communities at the heart of what we do will require our citizens and colleagues to work differently together.

The Committee will focus on areas relevant to its role and remit that have been identified by the Board as strategic priorities in the Board's Delivery Plans as agreed with the Scottish Government and on areas of high risk identified in the Board's Strategic Risk Register.

The Committee will take account of the need to assure itself on the sustainability of the actions reported to it.

2. ROLE AND REMIT OF THE COMMITTEE

2.1 Public Health

- 2.1.1 To seek and provide constructive challenge and oversight of the Board's transition to becoming a Learning Health System, defined as one in which knowledge generation process are embedded in practice to produce continual improvement in population health and care
- 2.1.2 To seek and provide assurance that NHS Grampian is fulfilling its statutory duties in respect of public health as set out in the Public Health etc. (Scotland) Act 2008
- 2.1.3 To provide constructive challenge and oversight of delivery plans for public health measures to ensure maximum benefit and delivery on agreed outcomes
- 2.1.4 To seek and provide assurance to IJBs on delivery of prevention agenda beyond health promotion
- 2.1.5 To monitor the expenditure of funding allocated to public health activities by the Board

- 2.1.6 To obtain assurance that the Board's delivery plan aligns with the organisational commitments to Community Planning Partnerships.

2.2 Creating Equity

- 2.2.1 To seek assurance on behalf of the Board that NHS Grampian has efficient processes to identify variation in outcomes, incorporating those with protected characteristics and other vulnerable groups
- 2.2.2 To scrutinise significant strategic change programmes to ensure there is a positive impact (where possible) on reducing variation in outcomes between groups with protected characteristics and other vulnerable groups and services are adapted to meet the needs of those groups appropriately
- 2.2.3 To monitor NHS Grampian's compliance with its statutory duties under the Fairer Scotland Duty, the Equalities Act, the Human Rights Act, UN Conventions on the Rights of the Child and Community Empowerment Act, including monitoring the use of impact assessments across the organisation when service changes are planned
- 2.2.4 To ensure the advocacy role of the Board is fulfilled in raising awareness of, and need for action to address, the health needs of the population of the North East
- 2.2.5 To seek assurance that NHS Grampian is fulfilling its role as an Anchor Organisation.

2.3 People Powered Health

To obtain assurance on behalf of the Board that;

- 2.3.1 the Board is fulfilling its statutory duties in respect of engagement and participation.
- 2.3.2 meaningful and effective listening and engagement approaches are embedded in processes when the Board is redesigning services.
- 2.3.3 NHS Grampian services are seeking and using feedback from patients, carers, partners, including academic partners, staff and communities to improve services and that the processes to obtain and demonstrate learning from feedback are effective.
- 2.3.4 effective co-production approaches are used to ensure that a range of voices, including seldom heard voices, inform the choice and design of services.
- 2.3.5 NHS Grampian is building networks, collaborating with other anchor organisations and the voluntary and community/social enterprise sector to achieve its strategic objectives as set out in the Board's agreed strategic plan.
- 2.3.6 communications with the public about NHS Grampian services, including service redesign and transformation, are effective and that there is a cycle of learning and continuous improvement for such communications across the system

2.4 Management of Committee Business

- 2.4.1 Ensure good communication and relationships with other standing committees of the Board and other stakeholders and that Committee decisions are communicated appropriately to internal and external audiences

- 2.4.2 Ensure Committee members are provided with appropriate information and training to support them in carrying out their roles and review development needs at least annually
- 2.4.3 Prepare a Committee annual work plan which takes account of the strategic outcomes of the Board, the Integration Joint Boards and key strategic risks relevant to the role and remit of the Committee
- 2.4.4 Prepare an annual report which takes account of the strategic outcomes of the Board and key strategic risks relevant to the role and remit of the Committee and summarises how the Committee has discharged its responsibilities over the year.
- 2.4.5 Ensure that all elements of the Committee's Terms of Reference are being scrutinised effectively through use of a matrix to monitor frequency of relevant items against each term of reference in the agendas for the Committee meetings and include a summary of this matrix in the Committee's annual report.
- 2.4.6 Provide appropriate information for inclusion in the NHS Grampian Annual Statement of Internal control.
- 2.4.7 The Committee may obtain external professional advice were considered necessary.

3. RELATIONSHIP TO OTHER COMMITTEES AND ASSURANCE MAP

The Committee's relationship to other Board and operational committees, and sources of assurance, is shown on the attached assurance map.

The Committee will review this assurance map at least annually and update to ensure it reflects the management and operational structure of the organisation, taking advice from the Executive Lead(s) on this issue.

4. EXECUTIVE LEAD

The designated joint Executive Leads are the Director of Public Health and the Director of Marketing & Corporate Communications who support the Chair of the Committee in ensuring that it fulfils its agreed Terms of Reference by:

- Liaising with the Chair in agreeing a programme of bi-monthly meetings, as required by its remit.
- Overseeing the development of an assurance report for the Board which is congruent with the committee's remit and the need to provide appropriate assurance.
- Agreeing with the Chair an agenda for each meeting, having regard to the Committee's remit.
- Overseeing self-assessment on the effectiveness of the Committee and agreeing with the Chair a programme of development for members of the Committee.

5. MEMBERSHIP and ATTENDANCE

Chair:	The Committee Chair is a Non-Executive Board Member as agreed by the Chair of Grampian NHS Board.
Members:	There will be 6 Non-Executive Board Members
In Attendance:	Director of Public Health Executive Nurse Director Director of People & Culture Deputy Director of Public Health Deputy Chief Executive Director of Marketing & Corporate Communications Aberdeen City, Aberdeenshire, Moray Health and Social Care Partnership Chief Officers Portfolio Leads – Planned Care and Women and Children Public representative
Management Support:	TBC
Administrative Support:	TBC

In the event of the Deputy Chief Executive, Director of Public Health, Executive Nurse Director, Director of People & Culture and Director of Marketing & Corporate Communications being unable to attend, it is expected that a deputy will attend in their place and that deputy will be notified to the Chair in advance of the meeting.

All Board Members have a right to attend as observers.

Other staff will be invited to attend Committee meetings to inform and/or report on specific matters or by prior arrangement as observers.

6. QUORUM

At least three members of the Committee must be present in order to form a quorum

7. DEPUTIES

The Chair will appoint a Meeting Deputy (to cover unavoidable absence) from the members.

8. MEETINGS

There will be 5 meetings per annum with provision for additional meetings as required.

Agenda setting meetings are held at least 4 weeks prior to the meeting and Committee papers are issued one week in advance.

Written documentation will be expected in support of all agenda items, except for those under “Matters Arising”.

When confidential and sensitive information requires to be discussed, this will be held within a closed session. The minute of closed sessions are confidential and will not be shared out with the membership of the Committee.

9. MINUTES/REPORTS

The business of the Committee is recorded in a formal minute which, once approved, is circulated to the Board. At that time, they are available to all staff on the NHS Grampian intranet and can be accessed under the provision of the Freedom of Information Act (Scotland) 2002.

When confidential and sensitive information requires to be discussed this will be held within a closed session. The minute of closed sessions are confidential and will not be shared out with the membership of the Committee.

10. STANDING ORDERS

The provisions of the NHS Grampian Standing Orders for Board meetings shall apply to this Committee as far as is practicable and appropriate.

Decisions reached by the Committee are by consensus with all members agreeing to abide by such decisions (to the extent that they are in accordance with these terms of reference).

11. SUB-COMMITTEES

There may be other informal working groups dependent on programme of work of the Committee.