

LINCOLNSHIRE HEALTH AND WELLBEING BOARD

Open Report on behalf of Derek Ward, Director of Public Health

Report to	Lincolnshire Health and Wellbeing Board
Date:	14 June 2022
Subject:	Proposed changes to the Health and Wellbeing Board Terms of Reference

Summary:

The Lincolnshire Health and Wellbeing Board (HWB) is required to review its governance arrangements on an annual basis. In March 2021, the Board endorsed proposals to incorporate, into the HWB, the functions of the interim Integrated Care Partnership (ICP). These were formally approved by full Council in May 2021 and relevant changes were made to the Council's Constitution.

From 1 July 2022, the introduction of Integrated Care Systems (ICSs) will require the Integrated Care Board (ICB) and local authority to jointly establish an ICP which cannot be the same as the HWB. As a consequence, the HWB Terms of Reference need to be updated to reflect the introduction of the ICP. The proposed changes will be subject to sign off by full Council in September and formal adoption by the HWB at the next meeting.

Actions Required:

The HWB is asked to:

1. endorse the changes to the Terms of Reference, Procedural Rules and Board Member's Roles and Responsibilities as set out in Appendix A.
2. recommend the changes to full Council on 16 September 2022 to enable the relevant changes to be made to the Council's Constitution.
3. note the update on the development of Lincolnshire's Integrated Care Partnership.
4. endorse the recommendation to extend Associate Membership to a representative from Higher Education and the Lincolnshire Enterprise Partnership.

1. Background

1.1 Amendments to the Terms of Reference

The functions of the Board are set out in Sections 195 and 196 of the Health and Social Care Act 2012 as follows:

- To encourage persons who arrange for the provision of any health and social care services in the area to work in an integrated manner;
- To provide advice, assistance or other support, as it thinks appropriate, for the purpose of encouraging joint commissioning;
- To prepare and publish a Joint Strategic Needs Assessment (JSNA) on the local population;
- To prepare and publish a Joint Health and Wellbeing Strategy (JHWS).

Whilst the new Health and Care Act 2022 does not change these core functions it does embed the Health and Wellbeing Board, principally as a consultee, in a number of the statutory processes associated with the operations of the new Lincolnshire Integrated Care Board (ICB) and in particular its production of an annual five year plan.

In line with the legislation, the Board was constituted as a formal committee of the County Council in April 2013. The Terms of Reference and Procedural Rules were formally adopted by the Board in September 2013 and are subject to annual review.

At the meeting on 9 March 2021, the Board endorsed proposals for the HWB to incorporate the functions of the interim ICP with the intention to take on the formal responsibilities once the ICP was required in law. The Board also agreed to recommend the proposal to full Council on 21 May 2021 to enable the relevant changes to be made to the Council's Constitution. The HWB formally adopted the updated Terms of Reference at the AGM meeting on 3 June 2021.

Following Royal Assent of the Health and Care Act 2022, on 28 April 2022, ICPs will be formally established from 1 July 2022. To achieve this the Act requires the County Council and the newly formed Integrated Care Board to jointly establish an ICP as a statutory joint committee of the two bodies. The ICP will have a statutory responsibility to create an Integrated Care Strategy for Lincolnshire.

Since the HWB is a committee of the County Council it has fundamentally a different legal status to the ICP as a statutory joint committee. Furthermore, the ICP is given statutory responsibility for the production of an Integrated Care Strategy for the area and cannot pass that responsibility to another body. Therefore, the HWB cannot fulfil the role of an ICP.

The statutory duties for the HWB to prepare and publish the JSNA and JHWS remain, supplemented by the new roles given to the HWB by the Act in particular as a consultee on the development of the Integrated Care Board's five year plans. The Board therefore needs to remove reference to the functions of the ICP from the Terms of Reference. The changes will also need to be recommended to full Council on 16 September 2022 to enable the relevant changes to be made to the Council's constitution.

The amended Terms of Reference and Procedural Rules, along with the Board Member's Roles and Responsibilities showing the proposed revisions, are provided in Appendix A.

1.2 Integrated Care Partnership

Lincolnshire is only one of four coterminous ICS systems nationally so there is an opportunity to benefit from this to achieve our shared ambition. Although at the level of the Act the different roles of the ICP and HWB can be distinguished, the coterminous boundary means that it is challenging to fully define the

practical difference between the ICP and HWB and manage the clear risk of duplication. To inform the development of Lincolnshire’s ICP a workshop was held on 26 April 2022 attended by members of the HWB and wider partners. The purpose of the session was to:

- Develop a shared understanding of the roles and responsibilities of the HWB and ICP
- Gain consensus about how the HWB and ICP need to work together and the arrangements that need to be in place to ensure an effective, seamless relationship
- Ensure these roles and responsibilities align to a shared ambition and values of Lincolnshire ICS.

At the session the following practicalities around the running of the ICP were proposed:

- HWB and ICP to align meeting times, locations, and frequency
- Terms of Reference to be refreshed, agreed, and reviewed annually
- An Executive Councillor of the County Council should be Chair of the ICP
- Use the JHWS 2018 to as the basis for the development of the Integrated Care Strategy
- The HWB and ICP to jointly oversee the Integrated Care Strategy.

1.3 Membership

In order to fulfil the shared ambition to align the HWB and the newly developing ICP it is recommended that the membership is mirrored. However, the membership of the ICP is a matter for the ICP once formed.

In terms of the HWB and to ensure a focus on reducing the inequalities for the population across Lincolnshire, it is proposed to offer an opportunity of membership for the HWB to a representative from Higher Education (HE) and the Greater Lincolnshire Local Enterprise Partnership (LEP). They will be joining the HWB as Associate Members (i.e. Associated members will not have voting rights at HWB meetings). Opening up membership to HE and the LEP supports the collective ambition to prevent and reduce health inequalities by focusing on the wider social, economic and health priorities.

The intention is to maintain a mirroring in the membership for the next 12 months with a view to review and refresh in June 2023 once the new arrangements have embedded.

2. Conclusion

The HWB is asked to endorse the governance documents and recommend the changes to the HWB Terms of Reference to full Council on 16 September 2022 to enable the necessary changes to be made to the Council’s Constitution.

3. Joint Strategic Needs Assessment and Joint Health & Wellbeing Strategy

The Council and Clinical Commissioning Group must have regard to the Joint Strategic Needs Assessment (JSNA) and Joint Health and Wellbeing Strategy (JHWS).

The HWB is responsible for producing both the JSNA and JHWS.

4. Consultation

Not applicable.

5. Appendices

These are listed below and attached at the back of the report	
Appendix A	Health and Wellbeing Board Terms of Reference, Procedural Rules, Board Member's Role and Responsibilities.

6. Background Papers

The following background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

Document Title	Where it can be accessed
Changes to the Lincolnshire Health and Wellbeing Board Terms of Reference to incorporate the functions of the Integrated Care System Partnership	Lincolnshire County Council Website - Agenda for Lincolnshire Health and Wellbeing Board on Tuesday, 9th March, 2021, 2.00 pm (moderngov.co.uk)
Council Constitution – Changes to the Lincolnshire Health and Wellbeing Board Terms of Reference and membership to incorporate the functions of the Integrated Care System Partnership Board	Lincolnshire County Council website - Agenda for Council on Friday, 21st May, 2021, 10.30 am (moderngov.co.uk)
Terms of Reference and Procedure Rules, Roles and Responsibilities of Board Members	Lincolnshire County Council Website - Agenda for Lincolnshire Health and Wellbeing Board on Tuesday, 22nd June, 2021, 2.00 pm (moderngov.co.uk)

This report was written by Alison Christie, Programme Manager Strategy and Development, who can be contacted on alison.christie@lincolnshire.gov.uk

LINCOLNSHIRE HEALTH AND WELLBEING BOARD

TERMS OF REFERENCE and PROCEDURAL RULES

June 202~~1~~2

Next review date June 202~~2~~3

LINCOLNSHIRE HEALTH AND WELLBEING BOARD

Terms of Reference and Procedural Rules

1. PURPOSE

- 1.1 This document sets out the agreed principles and way of working for the Lincolnshire Health and Wellbeing Board ~~which includes acting as the Integrated Care System Partnership Board (ICSPB) from April 2021.~~
- 1.2 It reflects the strong and effective partnership working across the health and care system and a commitment to the joint endeavour to deliver better health outcomes to the people of Lincolnshire.

2. CONTEXT

- 2.1 The Lincolnshire Health and Wellbeing Board (the Board) is established as a consequence of Section 194 of the Health and Social Care Act 2012 as a committee of Lincolnshire County Council.
- 2.2 Lincolnshire has a long history of strong and effective joint working to address the factors that determine health throughout the life course, and to seek to reduce demand on health and care services in a more preventative and proactive way.
- 2.3 ~~The introduction of an Integrated Care System (ICS) in Lincolnshire is the next step on the evolution of partnership working. Health and Care System Leaders agree the ICS can best deliver outcomes for Lincolnshire by the Board fulfilling the role of the ICSPB.~~
- 2.4 ~~The advantages of this approach are seen to be:~~
 - 2.4.1 ~~It builds on the strong partnership working ethos cultivated through the Board since 2013.~~
 - 2.4.2 ~~The move towards population health management will ensure place based and neighbourhood working is focused on delivering outcomes based on the needs of the population.~~
 - 2.4.3 ~~It ensures a continued focus on the wider determinants of health which have an impact on an individual's health and wellbeing.~~
 - 2.4.4 ~~The coterminous boundary offers Lincolnshire advantages over other areas and maximises opportunities to work collaboratively.~~
 - 2.4.5 ~~It reflects a genuine desire across the local health and care system to develop innovative ways of working and to capitalise on the advances made during the Covid-19 pandemic.~~

3. OBJECTIVES

- 3.1 To provide strong local leadership across the health and care system to improve the health and wellbeing of Lincolnshire's population.

- 3.2 To maximise opportunities and circumstances for joint working and integration of services and make the best use of existing opportunities and process to prevent duplication or omission within Lincolnshire.
- 3.3 To work collaboratively to address the wider determinants of health – the physical, cultural, social and political environment in which we live – which impact on an individual's health outcomes.
- 3.4 To promote transformational change through shifting the health and care system towards preventing rather than treating ill health and disability by promoting self-care and healthy living.
- 3.5 To maximise the opportunities and resources available to Lincolnshire by integrating services.
- 3.6 To reduce current inequalities in the provision of healthcare and close the gap.
- 3.7 To ensure a focus on issues and needs, requiring partnership and collective action across a range of organisations, to deliver.

4. FUNCTIONS AND RESPONSIBILITIES OF THE BOARD

- 4.1 To deliver the functions of a Health and Wellbeing Board as set out in [Section 195 and 196 of the Health and Social Care Act 2012](#) as follows:
 - 4.1.1 To encourage persons who arrange for the provision of any health and social care services in the area to work in an integrated manner.
 - 4.1.2 To provide advice, assistance or other support, as it thinks appropriate, for the purpose of encouraging joint commissioning.
 - 4.1.3 To prepare and publish a Joint Strategic Needs Assessment (JSNA) on the local population.
 - 4.1.4 To prepare and publish a Joint Health and Wellbeing Strategy (JHWS)
- 4.2 To produce the Pharmaceutical Needs Assessment (PNA) in accordance with the [NHS \(Pharmaceutical and Local Pharmaceutical Services\) Regulations 2013 \(SI 2013/349\)](#) and liaising with NHS England and Improvement (NHSEI) to ensure recommendations or gaps in services are addressed.
- 4.3 To fulfil its role under section 14Z54 of the National Health Service Act 2006 and in particular to:-
 - 4.3.1 give its opinion to the Integrated Care Board (ICB) on whether the draft ICB 5 year plan (or any draft revision to the plan) takes proper account of the local joint health and wellbeing strategy under section 14Z54(5)(a); and
 - 4.3.2 determine whether to give that opinion to NHS England under section 14Z54(5)(b).
- 4.4 To determine whether to give to NHS England its opinion on whether the published ICB 5 year plan takes proper account of the local joint health and wellbeing strategy under section 14Z55

of the National Health Service Act 2006.

- 4.5 To fulfil its role as consultee in respect of the ICB's annual review of the steps that the ICB has taken to implement the joint local health and wellbeing strategy under section in accordance with section 14Z58 of the National Health Service Act 2006.
- 4.6 To respond to consultation by NHS England on any steps that the ICB has taken to implement any joint local health and wellbeing strategy as part of NHS England's annual performance assessment of the ICB under section 14Z59 of the National Health Service Act 2006.
- ~~4.3 To provide the overarching strategic partnership for the health and care system, setting the vision and strategy.~~
- ~~4.4 To provide oversight of the work undertaken by the member partners to take forward the Lincolnshire ICS to deliver the 'triple aim' duty for all NHS organisations of better health for the whole population, better quality care for all patients and financially sustainable services for the taxpayer.~~
- ~~4.5 To provide a system wide governance forum, including NHS, local government and wider partners, to enable collective focus and direction to the responsibilities and decision making of the individual partners.~~

5. MEMBERSHIP

- 5.1 The membership of the Board will comprise the following (* denotes statutory members of the Health and Wellbeing Board as required [by Section 194 of the Health and Social Care Act 2012¹](#)):
- The Executive Councillor for NHS Liaison, Community Engagement, Registration and Coroners
 - The Executive Councillor for Children's Services, Community Safety and Procurement
 - The Executive Councillor for Adult Care and Public Health
 - Five further County Councillors
 - The Director of Public Health*
 - The Executive Director of Children Services*
 - The Executive Director of Adult Care and Community Wellbeing*
 - Chair, ~~NHS Lincolnshire CCG~~ [NHS Lincolnshire Integrated Care Board](#)
 - Chief Executive, ~~NHS Lincolnshire CCG~~ [Lincolnshire Integrated Care Board](#)
 - Chair, Primary Care Network Alliance
 - Chair, United Lincolnshire Hospitals NHS Trust
 - Chief Executive, United Lincolnshire Hospitals NHS Trust
 - Chair, Lincolnshire Partnership Foundation NHS Trust
 - Chief Executive, Lincolnshire Partnership Foundation NHS Trust
 - Chair, Lincolnshire Community Health Services NHS Trust
 - Chief Executive, Lincolnshire Community Health Services NHS Trust
 - One designated District Council representative
 - The Police and Crime Commissioner for Lincolnshire
 - A designated representative of Healthwatch Lincolnshire*

¹ In addition to the positions highlighted, statutory membership of the Health and Wellbeing Board also includes at least one elected Councillor from the upper tier authority, nominated by the Leader of the Council, and at least one representative from each Clinical Commissioning Group whose area falls within or coincides with the local authority area.

5.2 Associate Members² of the Board are as follows:

- A designated representative from NHSEI
- Chief Constable/representative, Lincolnshire Police
- A designated representative for the Voluntary and Community Sector
- A designated representative from Higher Education
- A designated representative from the Greater Lincolnshire Local Enterprise Partnership

5.3 The Board will confirm the representative nominations by the partner organisations at the Annual General Meeting.

5.4 Board Members, through a majority vote, have the authority to approve individuals as Associate Members of the Board. The length of their membership will be for up to one year and will be subject to re-selection at the next Annual General Meeting (AGM).

5.5 Each non statutory member of the Board shall nominate a named substitute and provide details to the LCC Democratic Services Officer.

5.6 Two working days advance notice, that a substitute member will be attending a meeting of the Board, needs to be given to the LCC Democratic Services Officer.

5.7 Substitute members will have the same powers as Board Members.

6. CHAIR AND VICE CHAIR

6.1 The Board shall elect the Chair and Vice Chair at each AGM

6.2 The Chair and Vice Chair will not be from the same organisation.

6.3 The appointment will be by a majority vote of all Board Members/substitutes present at the meeting and will be for a term of one year.

7. ACCOUNTABILITY

7.1 The Board carries formal delegated authority to carry out its functions under Section ~~195 and 196 of the Health and Social Care Act 2012-4~~ above from the County Council.

7.2 Save for the statutory functions referred to in paragraph 7.1 the Board will not have decision-making powers and will not exercise any functions of any other partner body. It will discharge its responsibilities by means of recommendation to the relevant partner organisations, who will act in accordance with their respective powers and duties to improve health and wellbeing of the people living in Lincolnshire.

7.3 NHS Members will ensure that they keep their organisation advised on the work of the Board.

² Associate member status is appropriate for individuals wanting to be involved with the work of the HWB, but who are not designated as core members. The HWB has the authority to invite associated members to join and approve their membership before they take their place. Associate members will not, unless specifically requested, be consulted on dates and venues of meetings but are invited to submit agenda items and have a standing invitation to attend meetings if an issue they are keen to discuss is on the agenda. Associated members will not have voting rights at HWB meetings.

- 7.4 The District Council Member will ensure that they keep all District Councils advised on the work of the Board.
- 7.5 Board members bring the responsibility, accountability and duties of their individual roles to the Board to provide information, data and consultation material appropriate to inform the discussions and decisions.
- 7.6 ~~The arrangements for the Board to fulfil the role of the ICSPB do not affect the role and functions of the Health Scrutiny Committee for Lincolnshire.~~
- 7.7 The Board will report to Full Council and [to](#) NHSEI via the Regional Team as required.
- 7.8 The Board will provide information to the public through publications, local media, and wider public activities and by publishing the minutes of meetings on the County Council website ~~and Lincolnshire's Integrated Care System website.~~
- 7.9 When required the members of the Board will take place in round table discussions with the public, voluntary, community, private and independent sectors to ensure there is a 'conversation' with Lincolnshire communities about health and wellbeing.

8. ROLES AND RESPONSIBILITIES OF BOARD MEMBERS

- 8.1 To work together effectively to ensure the delivery of the functions and shared objectives are met for the benefit of Lincolnshire's communities.
- 8.2 To work collaboratively to build a partnership approach to key issues and provide collective and shared leadership for the communities of Lincolnshire.
- 8.3 To participate in discussions to reflect the views of their partner organisations, being sufficiently briefed and able to make recommendations about future policy developments and service delivery.
- 8.4 To champion the work and partnership approach in wider networks and in the community.
- 8.5 To ensure that there are communication mechanisms in place within the partner organisations to enable information about the priorities and recommendations are disseminated and appropriate action is taken to ensure the shared objectives are met.
- 8.6 To demonstrate commitment by prioritising attendance at meetings and development sessions.
- 8.7 To demonstrate commitment by prioritising activity in between meetings, such as responding to email communications and providing information within set deadlines.
- 8.8 To treat each other as equals, with respect and demonstrate that they value the contribution of others by listening and responding and encouraging real dialogue.
- 8.9 To act in accordance with the Board Member's roles and responsibilities listed in Appendix A.

9. BOARD MEETINGS

- 9.1 The Board will meet in public no less than four times per year including an AGM.
- 9.2 Additional meetings of the Board may be convened with the agreement of the Chair and Vice Chair.
- 9.3 The Board will hold development or wider partnership events as required. These meetings will be held in private.
- 9.4 All papers are to be sent to the Programme Manager Strategy and Development no later than 15 working days before the date of the scheduled meeting for approval with the Chair and Vice Chair. The appropriate committee report template should be used.
- 9.5 All finalised agenda items or reports to be tabled at the meeting will be sent by the Programme Manager Strategy and Development to the Democratic Services Officer no later than seven working days in advance of the next meeting. No business will be conducted that is not on the agenda.
- 9.6 Democratic Services will circulate and publish the agenda and reports at least five clear working days prior to the meeting. Exempt³ or Confidential⁴ Information shall only be circulated to Core Members.

10. PROCEDURE AT MEETINGS

- 10.1 Members of the public may attend all formal meetings of the Board subject to the exceptions in the Access to Information Procedure Rules as set out in [Part 4 of Lincolnshire County Council's Constitution](#).
- 10.2 Only Board members, or their substitute, are entitled to speak through the Chair. Associate Members and the public are entitled to speak if pre-arranged with the Chair before the meeting.
- 10.3 The aim of the Board is to make its business accessible to all members of the community and partners. Accessibility will be achieved in the following ways:
 - 10.3.1 Ensuring adequate access to Board meetings.
 - 10.3.2 To include a work programme of planned future work on the agenda.
 - 10.3.3 Reports and presentations are in a style that is accessible to the wider community, and of a suitable length, so that their content can be understood.
 - 10.3.4 Enabling the recording of meetings to assist the secretariat in accurately recording actions and decisions.

11. QUORUM

³ Exempt Information is information falling within any of the descriptions set out in Part I of Schedule 12A of the Local Government Act 1972 subject to the qualifications set out in Part II and the interpretation provisions set out in Part III of the said schedule.

⁴ Confidential Information is information furnished to partner organisations or the Board by a government department upon terms (however expressed) which forbid the disclosure of the information to the public or information the disclosure of which would breach any enactment.

11.1 Any full meeting of the Board shall be quorate if not less than a third of the Board membership are present.

11.2 This third should include the following:

- Either the Board Chair or Vice Chair, and in addition
- A Lincolnshire County Council Executive Councillor
- ~~An NHS Chair~~[An NHS Lincolnshire Integrated Care Board Representative](#)

11.3 Failure to achieve a quorum within thirty minutes of the scheduled start of the meeting, or should the meeting become inquorate after it has started, shall render the meeting adjourned until the next scheduled meeting of the Board.

12. DECLARATIONS OF INTEREST

12.1 At the start of all meetings, all core members who are members of Lincolnshire County Council shall declare any interest in accordance with the Member's Code of Conduct which is set out in [Part 5 of the Lincolnshire County Council's Constitution](#)

13. VOTING

13.1 Each core member or substitute member shall have one vote.

13.2 Wherever possible, decisions will be reached by consensus. In exceptional circumstances and where decisions cannot be reached by consensus of opinion, voting will take place and decisions agreed by a simple majority. The Chair will have a casting vote.

13.3 **Except in relation to the matters referred to in Section 4 above, decisions** of the Board will be as recommendations to the partner organisations to deliver improvements in the health and wellbeing of the population of Lincolnshire.

14. CONDUCT OF MEMBERS AT MEETINGS

14.1 It is important to ensure that there is no impression created that individuals are using their position to promote their own interests, whether financial or otherwise, rather than the general public interest.

14.2 When at Board meetings or when representing the said Board, in whatever capacity, a member must uphold the seven [Nolan Principles of Public Life](#):

- Selflessness
- Integrity
- Objectivity
- Accountability
- Openness
- Honesty
- Leadership

15. MINUTES

15.1 Democratic Services shall minute the meetings and produce and circulate an action log as

part of the agenda to all core members.

- 15.2 Democratic Services will send the draft minutes to the Director of Public Health, Chief Executive of ~~NHS Lincolnshire CCG~~ the NHS Lincolnshire Integrated Care Board and lead officers within ten working days of the meeting for comment.
- 15.3 The draft minutes, following comment from relevant officers (point 15.2 above), will be circulated to core members.
- 15.4 The draft minutes will be approved at the next quorate minuted meeting of the Board.
- 15.5 LCC Democratic Services will publish the minutes, excluding Exempt and Confidential Information, on the Lincolnshire County Council website.

16. OFFICER AND ADMINISTRATIVE SUPPORT

- 16.1 Appropriate officer and administrative support to be provided by Lincolnshire County Council ~~and NHS Lincolnshire CCG~~.

17. EXPENSES

- 17.1 Partnership organisations are responsible for meeting the expenses of their own representatives.

18. OPERATIONAL/WORKING SUBGROUPS

- 18.1 With the agreement of the Board, operational/working subgroups can be set up to consider specific issues or areas of work to support the activities of the Board. Operational/working subgroups will be responsible for arranging the frequency and venue of their meetings.
- 18.2 Any recommendations of the operational/working subgroup will be made to the Board who will consider them in accordance with these terms of reference.

19. REVIEW

- 19.1 This document will be reviewed on an annual basis and confirmed at the AGM, or earlier if necessary.
- 19.2 Any amendments shall only be included by a majority vote.

Signature:

Signature:

Chair
Lincolnshire Health and Wellbeing Board

Vice Chair
Lincolnshire Health and Wellbeing Board

Date:

Date:

Key roles and responsibilities of individual core board members

Core Member	Key Roles and Responsibilities
Lincolnshire County Council Executive Members	<ul style="list-style-type: none"> • Report any issues raised by the public to the Board • Report any issues raised by other councillors to the Board • Provide strategic direction in relation to Lincolnshire's Joint Health and Wellbeing Strategy • Report publicly on the work and progress of the Board • Report to Executive on the work and progress of the Board • Promote and ensure co-production of all commissioning plans and proposals
Lincolnshire County Councillor	<ul style="list-style-type: none"> • Report publicly on the work and progress of the Board • Report any issues raised by the public to the Board • Report any issues raised by other councillors to the Board
Director of Public Health	<ul style="list-style-type: none"> • Update the Board on public health related matters • Ensure Lincolnshire is addressing health inequalities and promoting the health and wellbeing of all Lincolnshire residents • Lead the revision and publication of the JSNA • Lead the revision and publication of the Joint Health and Well-being Strategy
Adults and Children's Executive Directors	<ul style="list-style-type: none"> • Report on commissioning activity to the Board • Provide relevant information requested by the Board • Contribute to the creation of the JSNA • Have regard to the JSNA and the JHWS when developing commissioning and budget proposals • Report Board activity to assistant directors and heads of service
NHS Lincolnshire Integrated Care Board (ICB) Clinical Commissioning Group	<ul style="list-style-type: none"> • Ensure that the Clinical Commissioning Group <u>ICB</u> members/partners directly feed into the JSNA • Have regard to the JSNA and the JHWS when developing commissioning and budget proposals • Report commissioning activity to the Board • Report Board activity to other Clinical Commissioning Group <u>ICB</u> members
Lincolnshire Healthwatch Representative	<ul style="list-style-type: none"> • Reflect the public's views acting as the patient's voice to report any issues raised by the public to the Board • Promote community participation and co-production in support of activity • Ensure evidence from Healthwatch is fed into JSNA evidence base • Report on and from Healthwatch England • Ensure the JHWS reflects the need of Lincolnshire's population • Provide reports to the Board on issues raised by providers or the public of Lincolnshire
District Council Representative	<ul style="list-style-type: none"> • Promote the Board's intentions to District Council partners • Ensure evidence from the District Council is fed into JSNA evidence base • Feedback any issues raised by partner districts or the public to the Board

Core Member	Key Roles and Responsibilities
Office of the Police & Crime Commissioner	<ul style="list-style-type: none"> • Update the JHCPB on any relevant commissioning intentions or issues • Provide a strategic link between the HWB agenda and community safety • Highlight any areas of mutual interest and benefit • Have regard to JSNA and JHWBs when developing commissioning and budget proposals
NHS Provider Organisations	<ul style="list-style-type: none"> • Provide a strategic link between the Board and the STP programme • Have regard to the JSNA and the JHWS • Provide insight and perspective from the wider NHS in Lincolnshire

Associate Members – <i>individuals wanting to be involved with the work of the HWB, but who are not designated as core members.</i>	Key Roles and Responsibilities
NHS England Representative	<ul style="list-style-type: none"> • Update the Board on any national commissioning issues which will affect Lincolnshire’s JHWS • Feedback on any issues raised by the Board affecting Lincolnshire to NHSEI • Report on direct commissioning activity • Have regard to JSNA and JHWS when developing commissioning and budget proposals
Chief Constable/ Representative, Lincolnshire Police	<ul style="list-style-type: none"> • Update the Board on any community safety issues which will affect Lincolnshire’s JHWS • To support joint working on cross cutting agendas, for example mental health and substance misuse • To support partnership working and system integration • To support the JSNA and JHWS
Voluntary and Community Sector	<ul style="list-style-type: none"> • To act as the representative for the wider voluntary and community sector in Lincolnshire. • Establish networks and mechanisms to feedback to the wider voluntary and community sector. • Reflect the public’s views acting as a voice to report any issues raised by the public to the Board • Promote community participation and co-production in support of activity
<u>Higher Education</u>	<ul style="list-style-type: none"> • <u>To act as the representative for the higher education sector in Lincolnshire.</u> • <u>To support partnership working and system integration</u> • <u>Promote participation and co-production in support of activity</u>
<u>Greater Lincolnshire Local Enterprise Partnership</u>	<ul style="list-style-type: none"> • <u>To act as the representative for the business and enterprise sector in Lincolnshire.</u> • <u>To support partnership working and system integration</u> • <u>Promote participation and co-production in support of activity</u>