**Appendix C: Draft terms of reference – GM Health and Care Board**

**Greater Manchester Health and Care Board**

**Terms of Reference (draft)**

**1. Background**

1.1 The Greater Manchester (GM) Health and Social Care Devolution Memorandum of Understanding, signed in February 2015 facilitated the establishment of a governance approach that would be responsible for the delivery of the GM vision for Health and Social Care. The MoU was aimed at supporting GM to assume full responsibility for NHS funding streams in Greater Manchester.

1.2 A principle of subsidiarity runs throughout the MoU, seeking to ensure no decisions about GM are made without GM and that all decisions are made at the most appropriate level. The governance structures put in place through the MoU enable all parts of the HSC system in GM to have input into and influence over the overall vision for GM, creating a dispersed style of leadership. This has ensured collective ownership of the vision and a collaborative approach to delivery, although we could and should go further in this respect.

1.3 The GM MoU is cognisant of the existing accountability arrangements and responsibilities held by local authorities, CCGs and NHS Providers. The MoU also contained a commitment to regularly review the governance as Greater Manchester Health and Social Care Partnership (The Partnership) develops, recognising the governance arrangements would be an iterative process and would therefore need to change over time.

1.4 As we move more deeply into implementation of our programmes and start to think about our future operating model post transformation phase we are refreshing the governance arrangements for the Partnership. Proposals for a new governance structure incorporate a non-statutory GM Health and Care Board focused on providing the overall strategic vision and direction for health and social care in Greater Manchester.

**2. Aims and objectives**

The primary aim of the GM Health and Care Board is the provision of strategic direction for health and social care in Greater Manchester. It will do this through a clear and shared understanding of need across GM.

**3. Principles**

 The GM Health and Care Board will:

* Be the public face of the GM Health and Social Care Partnership
* Ensure the voice of residents influences the development of strategy
* Focus on the implications of change on residents

**4. Roles and responsibilities**

The GM Health and Care board will be responsible for:

* Oversight of the vision for health and social care in Greater Manchester as outlined in the GM Strategy: Taking Charge
* Ensuring a full understanding of the health and care needs of our population and the assets and resources that exist to help meet those needs.
* Galvanising support across all parts of the GM HSC system behind a joint focus on action and change
* Promoting integration across organisations and localities to improve health and wellbeing for residents
* Ensuring that citizens are properly engaged in the development all plans and programmes.
* Creating a greater sense of place within GM health and social care organisations ensuring this influences the development and implementation of strategy
* Delegation of aspects of delivering the GM vision for health and social care to the relevant governance groups and holding those groups to account
* The use of GM health and care funding including the GM Transformation Fund and any similar GM level funding allocations aligned to the GM HSC Strategy.

The GM Health and Care Board will delegate responsibility for the operationalisation of the GM Strategy: Taking Charge to the GM Health and Social Care Partnership Executive. This will include but is not limited to:

* Performance across the GM HSC system
* Delivery of strategy
* Transformation fund allocation and assurance
* Management of risk

**5. Membership**

The membership of the GM Health and Care Board will represent the whole health and social care system in GM incorporating representatives from:

* Each of the Greater Manchester CCGs (Chair and Chief Officer)
* Each of the Greater Manchester Providers (Chair and Chief Executives)
* Each of the Greater Manchester Local Authorities (Leader and Chief Executive)
* NHS England through the Chief Officer of the GM HSC Partnership
* NHS Improvement
* Public Health England
* Primary Care through the LMC
* The GM Combined Authority through the GM Mayor and Chief Executive
* GM Fire and Rescue Services
* GM Police
* Community, voluntary and social enterprise sector representatives
* Healthwatch representatives

The Board will be chaired by the GM Combined Authority portfolio holder for Health and Social Care.

Members of the GM Health and Care Board will be expected to represent both their organisation and locality at the Board.

**6. Voting**

As outlined in the GM Health and Social Care Devolution MoU, the voting members of the GM HSC Partnership are those sectors who were original signatories to the devolution agreement with the addition of primary care representatives, in recognition of the significant proportion of the health and care system they represent.

Where a vote is required to agree a particular proposal, 80% support is required for the proposal to be carried.

**7. Meeting frequency**

GM Health and Care Board will meet every two months. The venue for the meeting will move around the ten localities of GM ensuring a locality dimension to the meetings themselves and increasing public accessibility across GM.

**8. Accountability and wider governance**

The GM Health and Social Care Partnership Executive is directly accountable to the GM Health and Care Board. In addition the GM Children’s Health and Wellbeing Board, Health Innovation Manchester, the Digital Collaborative and the GM Workforce Collaborative will also be report directly into the GM Health and Care Board.

**9. Declarations of interest and decision log**

Declarations of interest will be requested and logged at the start of each meeting and a decision log will be completed following every meeting in line with the requirements of the GM accountability agreement.

**10. Support arrangements**

The GM Health and Care Board will be supported by the GM Health and Social Care Partnership and the GMCA Governance and Scrutiny Team.

**11. Date agreed and review date**

These terms of reference were agreed on (include sign off date) and will be reviewed on an annual basis to ensure they reflect the changing requirements of the GM Health and Social Care Partnership.