

## **Interim ICS Partnership Board (“IIPB”)**

### **Terms of Reference**

#### **1. Introduction**

- 1.1. The IIPB has oversight of the Norfolk and Waveney Health and Care Partnership.
- 1.2. The IIPB recognises and respects that individual members have their own governance arrangements. Like the STP Oversight Group, whilst it has no direct authority, the IIPB will achieve its remit through forging strong partnership working, based on mutual trust and respect, and use its collective influence to bring about transformation and improvement.
- 1.3. It was intended that a full ICS Partnership Board be established from April 2021. However due to the operational pressures caused by the Covid 19 Pandemic, it has been agreed that an interim Partnership Board would be put in place to carry out some of the functions of the full Partnership Board until this could be established.
- 1.4. The IIPB is accountable to the Norfolk and Suffolk health and wellbeing boards for the contribution of the ICS to meeting the objectives of the two Health and Wellbeing Strategies. The IIPB is also accountable to NHSE/I for NHS performance and use of NHS resources.

#### **2. Membership**

- 2.1. The IIPB is comprised of the following members:
  - 2.1.1. Non-Executive Independent Chair;
  - 2.1.2. ICS Executive Lead/CCG Accountable Officer;
  - 2.1.3. Non-Executive Chair of each of the NHS Trusts and NHS Foundation Trusts in the Norfolk and Waveney ICS;
  - 2.1.4. Chair of the Norfolk and Waveney CCG;
  - 2.1.5. Chair of East Coast Community Healthcare Community Interest Company;
  - 2.1.6. Cabinet Member for Adult Social Care, Public Health and Prevention, Norfolk County Council;
  - 2.1.7. Cabinet Member for Children’s Services, Norfolk County Council;
  - 2.1.8. Chair of the Norfolk Health and Wellbeing Board;
  - 2.1.9. Chair of the Suffolk Health and Wellbeing Board;
  - 2.1.10. Non-Executive Director, EEAST;
  - 2.1.11. Regional Medical Director of NHSE/I East of England.

- 2.2. Currently the Chair of the Norfolk Health and Wellbeing Board is also the Cabinet Member for Adult Social Care, Public Health and Prevention at Norfolk County Council. As a result, the Leader of Norfolk County Council nominates another councillor to sit on interim ICS Partnership Board.
- 2.3. All members of the IIPB must have a good level of understanding of the Norfolk and Waveney Health and Care Partnership.
- 2.4. Any officers of Partnership organisations may be requested to attend the IIPB meetings as directed by members of the IIPB.
- 2.5. There shall be an administrator to the IIPB and they shall attend to take minutes of the meeting and provide appropriate support to the Chair and members.

### **3. Remit and Responsibilities of the IIPB**

- 3.1. The IIPB has no formal decision making authority but its remit is as follows:
  - 3.1.1. To bring key NHS, social care and public health partners together, to ensure the commitment of those with statutory responsibilities and funding. This with a common purpose of the triple aim of improving health outcomes and reducing unwarranted health inequalities, ensuring safe, high quality services; and securing sustainable use of NHS resources;
  - 3.1.2. To provide support and challenge to the ICS executive leadership team;
  - 3.1.3. To enable partners to have honest conversations and reach decisions, including on priorities and resources;
  - 3.1.4. To provide oversight and assurance to partner organisations, the Health and Well Being Boards and NHSE/I (for NHS resource and performance.)
  - 3.1.5. To oversee preparations for the establishment of a statutory Norfolk & Waveney ICS from April 2022
- 3.2. Further, via the Engagement Forum (which will support the IIPB) the IIPB will engage with staff, patients and the population of Norfolk and Waveney.

### **4. Meetings of the IIPB**

- 4.1. The IIPB will meet at least bi-monthly. The Chair may call a meeting of the IIPB at any time outside of the usual meetings. The IIPB meetings will be held virtually until such time as the meetings are able to take place in person.
- 4.2. The bi-monthly meetings will be open to the public.

4.3. Meeting dates will be set in April for the financial year and published at <https://norfolkandwaveneypartnership.org.uk/>. It will be made clear on the website whether the public have been excluded from the whole or any part of the meeting.

4.4. Meetings in addition to those referred to at 4.1 above can be called by the Chair.

#### 4.5. **Agenda, supporting papers and business to be transacted**

4.5.1. Items of business to be transacted for inclusion on the agenda of a meeting need to be notified to the administrator at least 10 working days (i.e. excluding weekends and bank holidays) before the meeting takes place. Supporting papers for such items need to be submitted at least 10 working days before the meeting takes place. The agenda and supporting papers will be circulated to all members of the meeting at least 7 working days before the date the meeting will take place.

4.5.2. Agendas and papers for the IIPB – including details about meeting dates, times and venues - will be published at:  
<https://norfolkandwaveneypartnership.org.uk/>

#### 4.6. **Chair of the IIPB**

4.6.1. The Chair of the IIPB will be the Non-Executive Chair of the Norfolk and Waveney Health and Care Partnership. The deputy chair will be agreed by the IIPB.

4.6.2. At any meeting of the IIPB the Chair of the IIPB, if present, shall preside. If the chair is absent from the meeting, the deputy chair, if any and if present, shall preside.

4.6.3. If the Chair is absent temporarily on the grounds of a declared conflict of interest the deputy Chair, if present, shall preside. If both the Chair and deputy Chair are absent, or are disqualified from participating, or there is neither a Chair nor deputy present, another member shall be chosen by the members present, or by a majority of them, and shall preside at that meeting.

#### 4.7. **Quorum**

4.7.1. At least 8 of the members (which must include 2 who are local government representatives) shall be a quorum.

4.7.2. If members have sent representation rather than themselves they will count towards the quorum provided the Chair is notified of the representative at the start of the meeting and receives confirmation from the representative that they have authority to act on behalf of member. If they do not have authority to act on behalf of the member they will not count towards the quorum.

4.7.3. If the quorum is lost due to member(s) being disqualified from taking part in a vote or discussion due to a declared interest then the ICS Managing Conflict of Interest Policy will be followed.

#### 4.8. **Decision making**

4.8.1. Generally it is expected that the IIPB's decisions will be reached by consensus. Should this not be possible then a vote of members will be required, the process for which is set out below:

**Eligibility** – Each member physically present at the meeting is entitled to one vote;

**Majority necessary to confirm a decision** – Each question put to the vote at a meeting shall be determined by a majority of votes of those members voting on the question;

**Casting vote** - In the case of an equal vote, there will be no casting vote;

**Dissenting views** – Should a vote be taken the outcome of the vote, along with any dissenting views, must be recorded in the minutes of the meeting.

#### 4.9. **Minutes**

4.9.1. The minutes will record the names of the individuals in attendance. The name of the administrator will also be included.

4.9.2. The minutes will be drawn up and circulated in accordance with members wishes and then formally signed off by the Chair of the meeting as a true record of the meeting.

### 5. **Relationship with the Norfolk Health and Well Being Board and the Suffolk Health and Well Being Board**

5.1. The IIPB will be accountable to the Norfolk and Suffolk Health and Wellbeing Boards for the contribution of the ICS to meeting the objectives of the two Health and Wellbeing Strategies. The approved minutes of IIPB meetings shall be formally recorded by the secretary of the IIPB and submitted to each of the Health and Wellbeing Boards.

5.2. The IIPB should also provide the Norfolk and Suffolk Health and Wellbeing Boards at each of its meetings with formal reports of its work and assurances that have been received and validated.

**6. Policy and best practice**

6.1. The IIPB will apply best practice in the decision making process for example by following Conflicts of Interest guidance published by NHS England.

6.2. The IIPB is authorised by the Norfolk and Waveney Health and Care Partnership to instruct professional advisors and request the attendance of individuals and authorities from outside the partnership with relevant experience and expertise if it considers this necessary or expedient to exercise its functions. However, any costs of this should be agreed with the IIPB before any agreements are entered into.

**7. Conduct of the IIPB**

7.1. The IIPB shall conduct its business in accordance with national guidance and relevant codes of conduct and good governance practice, including the Nolan Principles, managing conflicts of interest and standards of business conduct policies.

Date Agreed