



### **Derby and Derbyshire Prevention and Health Inequalities Board (PHIB)**

#### **TERMS OF REFERENCE**

##### **Background**

Why should we focus on prevention and health inequalities? Improving prevention, early intervention and tackling health inequalities are:

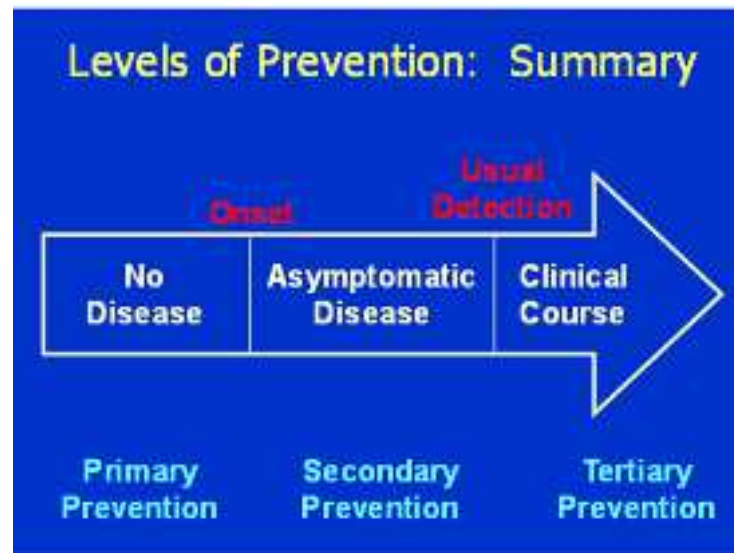
- Strategic aims for integrated care in Derby and Derbyshire and run throughout our Derby and Derbyshire Integrated Care Strategy.
- Central to the NHS's long-term plan and prevention programme nationally, our local Joint Forward Plan and Derby and Derbyshire's Health and Wellbeing Strategies as well as our organisational strategies.
- Key statutory requirements for both the NHS and local government to meet their duty to tackle health inequalities and improve population health and provide assurance on this function to the ICP.
- Enable a systematic approach to improvements in prevention and health inequalities and provide appropriate challenge, reporting back concerns and successes to the Derby and Derbyshire Integrated Care Partnership (ICP).

##### **Our working definitions**

###### ***Prevention***

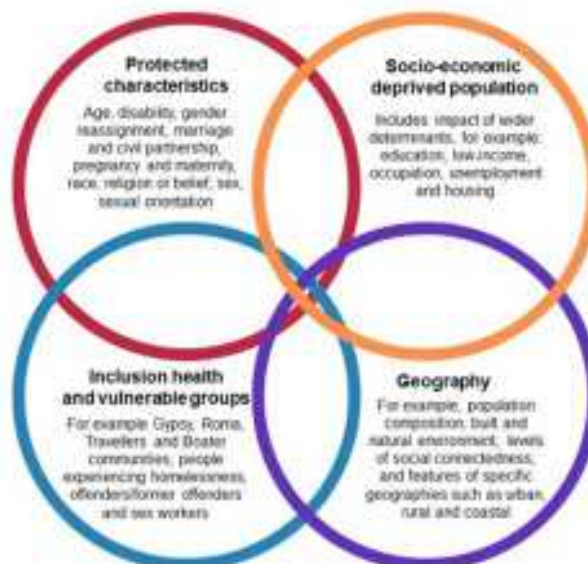
- Prevention in the context of health and wellbeing is defined as; "Taking action to reduce the incidence of disease and other health problems in the population".
- Prevention activities can improve health outcomes in the short, medium and longer-term.
- There are different levels of prevention:

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### Health Inequalities

- Health inequalities are defined by NHS England as; *“Unfair and Unjust difference in health status between groups, populations or individuals that arise from the unequal distribution of social, environmental and economic conditions within societies, which determine the risk of people getting ill, their ability to prevent sickness or opportunities to take action and access treatment when ill health occurs.”*
- Domains of health inequality (adapted from Health inequalities: place-based approaches to health inequalities):



### Strategic Context

The National Healthcare Inequalities Improvement Programme asks systems to focus on five priority areas:

1. Restoring NHS Services inclusively
2. Mitigating against digital exclusion
3. Ensuring datasets are complete and timely

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4. Accelerating preventative programmes, with a clear focus on the Core20PLUS5 approach for tackling health inequalities for both children and adults
5. Strengthening leadership and accountability

Joined Up Care Derbyshire will need to, as a requirement of the Joint Forward Local Plan publish action plans to address health inequalities in relation to:

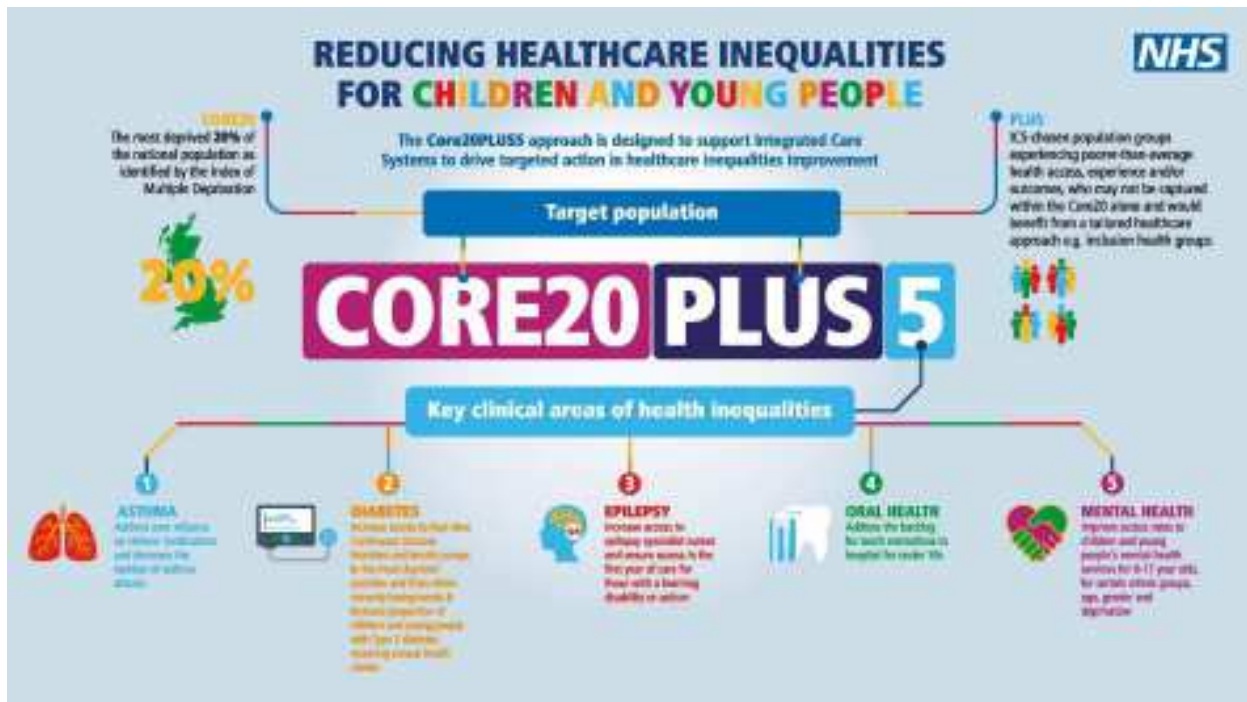
- Long term conditions with a focus on secondary prevention
- Build on recovery plans in elective/ UEC/ Primary Care
- Children and Young People
- Implementation of the Inclusion Health Framework
- Implementation of the Framework on Digital Inclusion
- Increase capacity and capability of workforce to understand their role in reducing healthcare and wider inequalities

This is underpinned by influencing multi-agency action to address and social determinants of health and locally a desire to develop a whole systems approach to addressing and tackling health inequalities, recognising that a range of partners across Joined Up Care Derbyshire need to support this agenda. PHIB will be required to work in partnership with system partners and other statutory boards, such as the Health and Wellbeing Boards, to develop this agenda and take action.

The Core 20PLUS5 approach for adults and children are summarised below;



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### Purpose and function

- The PHIB will Support allocation and use of resource for prevention and targeted activity to increase health equity.
- Provide strategic direction to the Integrated Care System and its component organisations, particularly supporting the Integrated Care Partnership and Health and Wellbeing Boards including the development and implementation of the Derby and Derbyshire Integrated Care Strategy, NHS Joint Forward Plan and Derby and Derbyshire Health and Wellbeing Strategies.
- Act in an advisory capacity, providing expert guidance to the system in relation to prevention and health inequalities to inform planning and delivery.
- Ensure the visibility and prioritisation of prevention and health inequalities within the system and challenge the system when this is not happening to a required or appropriate standard to deliver the 'left shift' in services and support the delivery of a local strategic aim for integrated care to 'prioritise prevention and early intervention to avoid ill health and improve outcomes' and 'reduce inequalities in outcomes, experience and access.'
- Identify and work to unblock barriers to achieving action on prevention and health inequalities and receive assurance from other strategic groups that solutions have been found.
- Receive assurance that key statutory requirements for both the NHS and local government are in place to make sure organisations are meeting their responsibilities to systematically address improvements in health inequalities, providing feedback to ICP on areas of concern or sharing good practice as required.

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- Provide oversight of activity across the system in relation to prevention and health inequalities supporting shared learning, evaluation, promoting the visibility of positive work and joining up and co-ordinating effort as appropriate.
- Recognise the responsibility and existing work of the individual organisations and partnerships within Joined Up Care Derbyshire, providing advice and guidance and supporting co-ordination where requested and beneficial.
- Provide constructive challenge to organisations and partnerships in Joined Up Care Derbyshire, where necessary.
- Promote linkages between groups and activities to minimise duplication of effort and maximise opportunity whilst ensuring we are not creating another silo.
- Promote interventions and action that are evidence-based through the use of, but not exclusively, population health management approaches and resources.
- Ensure that our communities are heard and trusted to co-produce local solutions building on and promoting the work of existing approaches and structures.
- Develop and oversee appropriate approaches to monitoring and evaluation to ensure that interventions within Joined Up Care Derbyshire provide the maximum impact for local residents.
- Ensure that the key priorities of focus from the National Healthcare Inequalities Improvement Programme are delivered across the Joined Up Care System and system funding for inequalities related work is prioritised against these areas of work and CORE20PLUS5 activities.
- Oversee the development of Core20PLUS5 ambassadors and connectors across the Joined Up Care Derbyshire system – anchor work/ work well
- Develop an approach to influencing how resources are used against prevention and health inequalities to ensure appropriate system wide investment. Recognising that decisions need to be taken within statutory bodies and acting in an advisory capacity as to what the most effective interventions are.

### Chairing arrangements

#### **Chair**

The meeting will be chaired by the Chief Medical Officer, Integrated Care Board (ICB).

#### **Vice-chair**

The Senior Responsible Officers for Prevention, Health Inequalities and Population Health Management will act as Vice-chairs.

### Membership

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Members should be senior leaders and key decision makers who are able to actively contribute to, and be collectively accountable for, the development and delivery of PHIB both from an organisational and system group role perspective:

- Chief Medical Officer, Integrated Care Board (Chair) (Chris Weiner)
- Senior Responsible Officer, Prevention/ Director of Public Health - Derbyshire (Vice-chair) (Ellie Houlston)
- Senior Responsible Officer, Health Inequalities/Director of Public Health - Derby (Vice-chair) (Robyn Dewis)
- Senior Responsible Officer, Population Health Management (PHM) (Vice chair) (Jayne Needham)
- Representative for Primary Care (Duncan Gooch)
- Representative from Provider Collaborative Leadership Board (Mark Powell)
- Chair of Integrated Place Executive (Penny Blackwell or nominated rep)
- Children's social care system representative (Andy Smith or nominated rep) (one rep working across both local authority areas)
- Adult social care system representative ((one rep working across both local authority areas) (tbc)
- Healthwatch – representing both Derby and Derbyshire Healthwatch's (tbc)
- VCSE system representation from VCSE Alliance (tbc)
- Chair of Strategic Intelligence Group (Liz Weis)

Specific officers may be asked to attend one or a series of PHIB meetings to provide detailed insight and input to particular topics or issues. These officers will not be able to vote on matters.

### **Attendance and substitutes**

Members are expected to prioritise attendance at PHIB. Where members are unable to attend, they are requested to nominate a suitable deputy to attend on their behalf.

### **Responsibilities of PHIB members**

Members should be senior leaders and key decision makers who are able to actively contribute to and be collectively accountable for providing system guidance on prevention and health inequalities.

*All members will:*

- Fully engage in the PHIB including active participation in discussions and decision-making relating to all relevant agenda items.
- Propose, as appropriate, agenda items, for information or discussion, to the PHIB.

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- Represent their respective organisations or networks they represent and take responsibility for communicating all relevant information within their organisation or network.
- Actively progress any strategic decision or action agreed at the PHIB through their own organisation and any relevant partners and networks.
- Ensure their organisations are fully represented and participate in relevant sub-groups and/ or Task and Finish groups as appropriate.
- PHIB members will be expected to action, coordinate, and feedback on agreed actions within agreed timescales.
- Helping community voices to be heard and feeding back what is being done in response to what has been heard.

### Frequency

The PHIB will meet every two months and will initially meet monthly in May, June and July 2023.

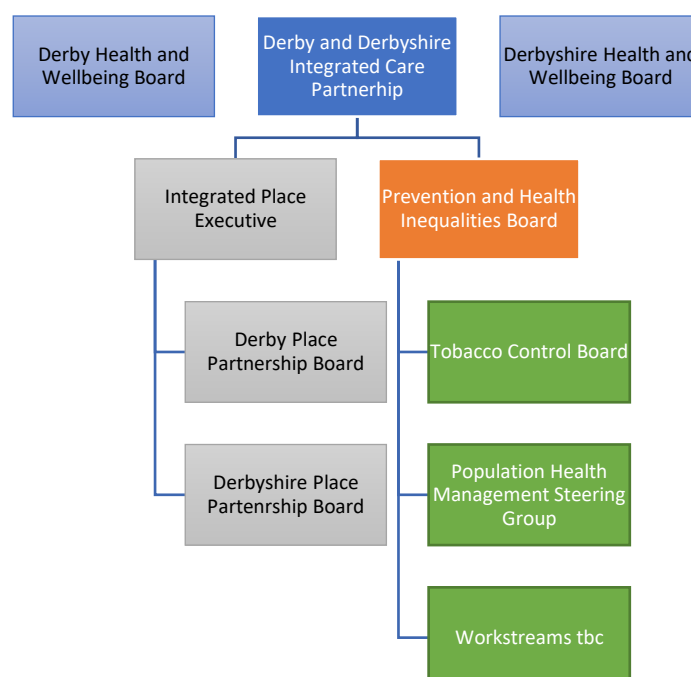
If there is insufficient business the Chair can agree to cancel the meeting up to 5 days in advance of the set meeting date.

The date, time and venue of meetings will be fixed in advance and an annual schedule of meetings will be agreed.

Additional meetings, as required, may be convened at the request of the Chair or Vice Chairs.

### Governance

The PHIB is a sub-group of the Derby and Derbyshire Integrated Care Partnership and will also report across to the Derby and Derbyshire Health and Wellbeing Board who have a place based role in promoting preventing and addressing health inequalities.





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PHIB will develop a strong relationship with SIG and over next 12 months and work will take place to formalise the reporting structure for SIG in relation to this Board.

### **Reporting**

The PHIB will directly report to the Integrated Care Partnership (ICP) providing regular updates on its activity and escalate barriers and risks to progress as necessary.

The PHIB will provide updates periodically to the Derby and Derbyshire Health and Wellbeing Boards.

PHIB will receive updates from workstreams, once established every six months as a minimum.

### **Relationships**

In addition to the formal reporting arrangements described above, the PHIB will need to develop and embed positive working relationships with the following boards and groups to support alignment of action across the system in relation to prevention and health inequalities, reducing duplication and maximising opportunities; provide advice and guidance, and, to share good practice and positive action in relation to prevention and health inequalities.

*Suggested boards/ groups to relate to:*

- Joined Up Care Derbyshire (JUCD) Delivery Groups and Committee
- Provider Collaborative Leadership Board
- Integrated Place Executive
- Derby and Derbyshire Place Partnerships
- Derby and Derbyshire Health and Wellbeing Board
- Derbyshire Health Protection Board
- JUCD Insight Group
- JUCD Strategic Intelligence Group
- PHM Steering Group
- Relevant organisational senior management teams

(note: this list is not exhaustive)

### **Agenda planning**

All PHIB members will be asked to put forward reports for consideration prior to agendas being finalised.

The Chair in consultation with the Vice-chairs will set the agenda for the meeting.

The agenda and associated reports will be shared with PHIB members at least five days before the meeting.

A forward plan will be developed to help support agenda planning.



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### **Action Log**

An Action Log of the proceedings will be approved at the next suitable meeting after they have been agreed as a correct record at that meeting. Members will need to be aware they will need to agree and request actions to ensure an accurate audit trail.

### **Quorum**

The meeting will be quorate when the Chair (or their nominated representative from the ICB) and at least one of the Vice-chairs (or their nominated representative) is present. The meeting will not proceed if Quorum is not met.

### **Secretariat**

The Secretariat role will be provided by Derby and Derbyshire Integrated Care Board.

### **Review**

These terms of reference will be reviewed annually or earlier if required.

### **Next Review**

April 2025.