

Annex C: City of York Health and Wellbeing Board**Terms of Reference for the Ageing Well Partnership
May 2021****A. Vision and purpose of the Ageing Well Partnership**

1. The overarching strategic vision for health and wellbeing in York is set out in the joint health and wellbeing strategy 2017-2022
2. The joint health and wellbeing strategy has four priorities one of which is ageing well.
3. The Ageing Well Partnership will translate the strategic vision for ageing well within the joint health and wellbeing strategy into action; bringing partners together to focus on its delivery.
4. The partnership will work to build a shared approach to delivering against the priorities for ageing well in the strategy.
5. The partnership will lead on the project for York to become an Age Friendly City.

B. The role of the Ageing Well Partnership

6. The Ageing Well Partnership is accountable to the York Health and Wellbeing Board for delivering against the priorities in the joint health and wellbeing strategy 2017-2022 and in the Health and Wellbeing Board's accompanying supplementary document
7. To ensure that partners work together in relation to older people on behalf of the whole health and social care system; acknowledging that some organisations work across multiple boundaries
8. To develop and implement an action plan to deliver against the priorities set out in the ageing well theme of the joint health and wellbeing strategy 2017-2022.
9. To drive improvement in the area of healthy ageing.
10. To lead on a project for York to become an Age Friendly City.
11. To oversee the delivery of the recommendations arising from the York Older People's Survey 2017 *[these are being taken forward as part of the Age Friendly City Project]*
12. To provide assurance to the Health and Wellbeing Board that the priorities identified in the ageing well theme of the strategy are being delivered

13. To provide an annual update on its activities for the Health and Wellbeing Board
14. To lead on and report back on any other work in the area of older people that the Health and Wellbeing Board requests
15. To feed into any refresh and/or renewal of the ageing well theme of the joint health and wellbeing strategy 2017-2022 as directed by the Health and Wellbeing Board

C. Membership

16. Partnership members will be required to represent their organisation with sufficient seniority and influence to take forward the vision and agenda of the partnership

Membership will consist of:

	Organisation	Position
1	Public Health Lead for Ageing Well	Co-Chair
2	NHS Vale of York Clinical Commissioning Group	Co-chair Position to be confirmed
3	City of York Council	Head of Service (Operations) & Dementia Lead
4	City of York Council	Commissioning Manager
5	York Centre for Voluntary Service	Chief Executive
6	York Older People's Assembly	Representative Nominated by YOPA
7	Healthwatch York	Deputy Manager
8	Tees, Esk and Wear Valleys NHS Foundation Trust	Position TBC
9	York Teaching Hospital NHS Foundation Trust	Position TBC
10	Age UK York	Representative
11	York Explore	Representative
12	Carer	Representative
13	Independent Care Group	Chief Executive
14	Primary Care	Primary Care Representative
15	North Yorkshire Sports Partnership	Chief Executive
16	North Yorkshire Fire and Rescue Service	Representative (as and when required)

17. Membership of the partnership will be reviewed periodically and can be amended at any stage with the agreement of existing members. Partner organisations may substitute for their named representative with the prior agreement of the Chair. Members of the partnership are asked to commit to attending the partnership meeting and will be expected to organise a deputy to attend if they are unavailable to attend themselves.
18. With the agreement of the partnership membership can be flexible to ensure that experts can be appointed to lead on specific projects
19. All partnership members will have equal status.
20. Partnership members will be expected to individually lead on specific work streams to ensure delivery of the ageing well theme of the health and wellbeing strategy
21. Partnership members are expected to disseminate information; updates and progress reports from the partnership meetings within their own organisations

D. Co-chairs

22. The partnership will be co-chaired by a representative from City of York's Public Health Team and a representative from NHS Vale of York Clinical Commissioning Group
23. The Co-chairs are responsible for determining the forward plan and agenda items (with assistance from the lead officer), ensuring the efficient running of the meeting, maintaining focus and facilitating and enabling participation of all those present and ensuring that confidential items are handled accordingly.

E. Leaving the partnership

24. A person shall cease to be a member of the partnership if s/he resigns or the relevant partner agency notifies the Chair of the removal or change of representative.

F. Lead Officer

25. A Lead Officer will be identified who will assist the Co-chairs in determining the forward plan, prioritising, scheduling and coordinating agenda items. They are responsible for ensuring that appropriate reports, presentations and

attendees are available for items tabled and act as a contact point for enquiries.

G. Interests of members

26. Partnership members must declare any personal or organisational interest in connection with the work of the partnership. Where there is a potential conflict of interest for individual members, this should be openly and explicitly declared. At the Chair's discretion the partnership member may be excluded from the discussion and / or decision making related to that particular agenda item.

H. Meetings

27. The partnership will normally meet on a two-monthly basis i.e. 6 meetings per annum. The partnership will be quorate when at least five members, including at least one representative from City of York Council or Vale of York Clinical Commissioning Group, and from two other partners, are present. If the meeting is not quorate it may proceed at the discretion of the Chair but may not take any decisions that would require a vote.

I. What the partnership doesn't do

28. The Partnership is not directly responsible for managing and running services but it does consider the quality and impact of service delivery across partner organisations. It does not have direct responsibility for budgets or have a budget of its own.

J. Involving people in the work of the partnership

29. The partnership expects that the views and involvement of local people will influence its work and its sub groups at all stages.
30. Reports to the partnership will be required to describe the way local people have been engaged in their preparation, and the partnership will adopt the co-production principles accepted by the Health and Wellbeing Board in 2017.
31. Specifically in terms of the Age Friendly City Project, the WHO checklist is the tool that the Partnership will use to ensure that there is a co-produced approach to identifying and delivering against action points and developing baseline assessments. The action plan for the project will be

developed through citizen feedback and will be scrutinised by the Age Friendly Citizen Group which is formally recognised by the partnership as the place where this should happen.

K. Accountability and reporting

32. The Ageing Well Partnership reports to the Health and Wellbeing Board
33. The partnership may establish 'task and finish' groups and/or working groups which focus on specific elements of the ageing well agenda. These groups are accountable to the partnership and will report to it at least twice a year

L. Culture and values: how the Partnership exercises its responsibilities and functions

34. The partnership will take into account the following behaviours and values in exercising its functions. Members will:
 - Have a commitment to a co-produced approach
 - Participate on the basis of mutual trust and openness, respecting and maintaining confidentiality as appropriate;
 - Work collaboratively, ensuring clear lines of accountability and communication;
 - Share expertise and intelligence and use this synergy to provide creative solutions to complex issues;
 - Take account of any particular challenges, policies and guidance faced by individual partners;
 - Have regard to the policies and guidance which apply to each of the individual partners;
 - Adhere to and develop their work based on the vision and priorities within the Joint Health and Wellbeing Strategy
 - Where decisions of the partnership require ratification by other bodies the relevant partnership member shall seek such ratification in advance of any meeting of the partnership or promptly following the partnership's recommendations;

These terms of reference will be reviewed annually.