



# **BSW ICB Community Engagement Committee**

## **Terms of Reference**

---

### **1. Introduction**

- 1.1 The Community Engagement Committee (the Committee) is established by the Integrated Care Board (the Board or ICB) as a Committee of the Board in accordance with its Constitution.
- 1.2 The Board has delegated authority to the Committee as set out in the Scheme of Reservations and Delegations (SoRD), and these may be amended from time to time. The Committee holds only those powers as delegated in these Terms of Reference, and as determined by the ICB Board.
- 1.3 These Terms of Reference set out the membership, remit, responsibilities and reporting arrangements of the Committee.

### **2. Purpose**

- 2.1 The Committee will support the ICB Board and contribute to the overall delivery of the ICB objectives by providing oversight and assurance to the Board on the ICB's compliance with statutory duties to engage effectively with patients and the public, and adequacy of its public involvement and community engagement activities.
- 2.2 The Committee has an assurance and advisory function. It has no executive powers, other than those delegated in the SoRD and specified in these terms of reference.
- 2.3 The Committee is a non-executive committee of the Board and its members, including those who are not members of the Board, are bound by the Standing Orders and other policies of the ICB.
- 2.4 Members individually and the Committee collectively must demonstrably consider the equality and diversity implications of decisions they make.

### **3. Responsibilities/Duties**

- 3.1 The Committee will ensure that the ICB meets its statutory duties on public and patient engagement and involvement and the requirements of the System Oversight Framework (SOF). It will provide support, leadership, advice and guidance to the ICB and the system, embedding a culture of engagement and inclusion in the development, design, delivery, monitoring and improving of all services. Within this remit, the Committee shall carry out the following duties on behalf of the Board:

#### **System**

- a. To work with partners, the Integrated Care Partnership (ICP) and the BaNES, Swindon and Wiltshire Integrated Care Alliances (ICA, place partnerships) to ensure engagement and involvement activities align, and support the achievement of system and place objectives;
- b. Working with partners, develop equality, diversity and inclusion strategies, strategies and plans that support the addressing of health inequalities, and effective engagement mechanisms at system, place and community levels to ensure effective involvement of the local population with health and care;
- c. To provide assurance that community engagement strategies at place and system level are delivered and effective;
- d. To actively seek, consider and disseminate best practice, policy and research evidence related to engagement and inclusion; and ensure that the ICS's approach to public and patient engagement and involvement adopts any such learning;
- e. To provide support, advice and guidance to help ensure co-ordination and consistency of public and patient engagement and involvement activities at system and place levels, and in collaboration with partners / other organisations.

#### **ICB corporate**

- f. To oversee the development of the ICB's public and patient engagement and involvement strategy and policy, and recommend both for approval to the Board. This includes regular review, ensuring that strategy and policy are kept up-to-date and aligned with relevant legislation / regulation as well as good practice. Provide assurance on implementation to the Board.
- g. To provide oversight and scrutiny of the implementation / application of the ICB's public and patient engagement and involvement strategy and policy, and provide assurance to the Board on the delivery of the strategy and associated plans, and compliance with the policy.
- h. To ensure, and provide assurance, that the ICB has robust and effective arrangements in place to deliver its statutory duties regarding the involvement and engagement of the public in:
  - i. the planning of the commissioning arrangements by the ICB;

- ii. the development and consideration of proposals by the ICB for changes in the commissioning arrangements where the implementation of the proposals would have an impact on the manner in which the services are delivered to the individuals (at the point when the service is received by them), or the range of health services available to them, and
- iii. decisions of the ICB affecting the operation of the commissioning arrangements where the implementation of the decisions would (if made) have such an impact.

For this purpose, the Committee will work closely with the Commissioning Assurance Committee, and other committees of the Board as appropriate.

- i. To ensure that meaningful, effective engagement with all communities and people is embedded (and can be evidenced) in the ICB's commissioning cycle and activities at system and place levels, and that the ICB is acting on community feedback as appropriate.
- j. To oversee the development of workforce equality, diversity and inclusion strategies, and associated policy / policies, and recommend these to the Board for approval. For this purpose, the Committee will work closely with the People Committee. This includes regular review, ensuring that strategy and policy / policies are kept up-to-date and aligned with relevant legislation / regulation as well as good practice.  
Provide assurance on implementation to the Board.

#### **4. Membership**

- 4.1 The Committee members shall be appointed by the Board in accordance with the ICB Constitution.
- 4.2 The following are members of the Committee, i.e. they have the right to attend meetings, receive meeting documents, and participate in decision-making and voting:
  - the ICB Non-Executive Director (Public and Community Engagement)
  - the ICB Non-Executive Director (Quality)
  - the Voluntary Community and Social Enterprise (VCSE) Partner Member of the Board;
  - the ICB Chief Nursing Officer;
  - one representative of Healthwatch
- 4.3 The following normally attend Committee meetings, i.e. they may receive meeting documents but cannot participate in the Committee's decision-making and must not vote:
  - the ICB Director of Communications
  - the ICB Director of Equalities, Innovation and Digital Enterprise
  - the ICB Chief People Officer
  - the ICB Director of Commissioning
- 4.4 In addition, the Chair, on behalf of the Committee, may invite such individuals to the Committee's meetings as are considered necessary to enable the Committee to

conduct its business effectively. For the avoidance of doubt, such invited attendees cannot participate in the Committee's decision-making and must not vote.

- 4.5 The Chair may ask any or all of those who normally attend, but who are not members, to withdraw to facilitate open and frank discussion of particular matters.
- 4.6 The Non-Executive Director (Public and Community Engagement) will Chair the Committee. The Chair will be responsible for agreeing the agenda and ensuring matters discussed meet the objectives as set out in these Terms of Reference.

## **5. Quorum**

- 5.1 A quorum shall be three members.
- 5.2 If the meeting becomes inquorate, it shall either be suspended, or decisions ratified at the next meeting of the Committee.

## **6. Reporting**

- 6.1 After each of its meetings, the Committee will report, through its Chair, to the Board about business transacted and decisions taken. For this purpose, the Committee will submit a report to the Board highlighting reporting items as agreed by the Committee at each meeting, and make available copies of its minutes.
- 6.2 In addition, and as agreed with the Committee, the Chair shall report on any matters within the remit of this Committee which in the Chair's view require the Board's attention and/ or executive decision making.

## **7. Authority**

- 7.1 In furtherance and support of its business, this Committee is authorised by the Board to:
- Investigate any activity within its terms of reference;
  - Seek any information it requires within its remit, from any employee or member of the ICB (who are directed to co-operate with any request made by the Committee) within its remit as outlined in these terms of reference;
  - Commission any reports it deems necessary to help fulfil its obligations;
  - Obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise if it considers this is necessary to fulfil its functions. In doing so the Committee must follow any procedures put in place by the ICB for obtaining legal or professional advice;
  - Create task and finish sub-groups in order to take forward specific programmes of work as considered necessary by the Committee's members. The Committee shall determine the membership and terms of reference of any such task and finish sub-groups in accordance with the ICB's constitution, standing orders and SoRD but may/ not delegate any decisions to such groups.

- Request and review reports from external experts and from individual functions within the ICB, as appropriate; and to seek assurances from the ICB on relevant matters.

7.2 For the avoidance of doubt, the Committee will comply with the ICB Standing Orders, Standing Financial Instructions and the SoRD.

## **8. Frequency of Meetings**

8.1 Meetings shall normally be held quarterly, and otherwise as required.

8.2 The Board, Chair or Chief Executive may ask the Committee to convene further meetings to discuss particular issues on which they want the Committee's advice.

## **9. Secretariat**

9.1 The Secretariat for the Committee is provided by the ICB corporate office. The Secretariat will ensure that:

- The agenda and papers are prepared and distributed in accordance with the Standing Orders having been agreed by the Chair with the support of the relevant executive lead;
- Attendance of those invited to each meeting is monitored and highlighting to the Chair those that do not meet the minimum requirements;
- Records of members' appointments and renewal dates are maintained, and the Board is prompted to renew membership and identify new members where necessary;
- Good quality minutes are taken in accordance with the standing orders and agreed with the chair and that a record of matters arising, action points and issues to be carried forward are kept;
- The Chair is supported to prepare and deliver reports to the Board;
- The Committee is updated on pertinent issues / areas of interest / policy developments;
- Action points are taken forward between meetings and progress against those actions is monitored;
- Governance advice is available and easily accessible for Committee members.

## **10. Conduct of meetings**

10.1 Committee meetings will be conducted in accordance with the BSW ICB's Constitution and Standing Orders.

10.2 Members of the Committee will

- conduct the Committee's business in accordance with any national guidance and relevant codes of conduct / good governance practice, including the Nolan principles of public life;
- comply with the standards of business conduct', including the protocols for managing conflicts of interest, as determined in the ICBs Constitutions,

Standards of Business Conduct Policies, and other relevant policies /  
guidance on good and proper meeting conduct for NHS organisations .

- 10.3 A meeting is constituted when members attend face-to-face, via telephone or video conferencing, any other electronic means, or through a combination of the above. Quoracy rules apply in any case. For the avoidance of doubt, this provision applies to and facilitates the Committee's decision making by email, should this be required to expedite an urgent decision.
- 10.4 Decisions will be taken in according with the Standing Orders. The Committee will ordinarily reach conclusions by consensus. When this is not possible the Chair may call a vote.
- 10.5 Only members of the Committee may vote. Each member is allowed one vote and a majority will be conclusive on any matter.
- 10.6 Where there is a split vote, with no clear majority, the Chair of the Committee will hold the casting vote.

## **11. Review**

- 11.1 The Committee will annually review its performance, its membership and these terms of reference, and recommend to the ICB's Board any amendments it considers necessary to ensure it continues to discharge its business effectively.

**Effective date:** 1<sup>st</sup> July 2022

**Review date:** July 2023

**Contact:** bswicb.governance@nhs.net