

PLEASE NOTE: These Terms of Reference are both Interim and subject to further discussion. Their application will be reviewed during the transition into the final state.

TERMS OF REFERENCE

Trust Board Committee Name	MENTAL HEALTH COLLABORATIVE COMMITTEE
Date Agreed	March 2022
Review Date	Initially formally reviewed in September 2022 then 6 monthly. Anticipated that in the long term, annual reviews will become the norm unless circumstances dictate that an earlier review is required
Updated	

<p>Purpose</p>	<p>The Mental Health Collaborative Committee is a committee of the Board of Herefordshire and Worcestershire Health and Care NHS Trust (the Trust). The Committee is constituted in line with the Standing Orders of the Trust and will operate in strict accordance therewith. The Committee differs from usual structures in that senior representatives from key partner organisations and sectors are members of the group to provide assurance and oversight across the wider system.</p> <p>Oversight and assurance will be a core responsibility addressing service transformation and performance, quality performance and improvement, financial control and risk management.</p> <p>The Committee will have powers of decision making and make recommendations to Trust Board. The views of partners should form an essential element of this within an open and transparent culture</p> <p>The Committee will sponsor and operate to the principles that underpin the Provider Collaborative model:</p> <ul style="list-style-type: none"> • Collaboration between Providers and across local systems, aligning priorities across the Partnership, and respecting sovereignty and risk and gain share • Experts by Experience and clinicians leading improvements in care pathways • People and patients come first – delivering parity of esteem and outcomes • Managing resources and ensuring value for money across the collaborative to invest in community alternatives and reduce inappropriate admissions/care away from home • Delivering a clinically and financially sustainable health and care system • Working with local stakeholders • Improvements in quality, patient experience and outcomes driving change • Built upon innovation, international evidence, and proven best practice. • Advancing equality for the local population <p>The committee will also foster the agreed H&W Mental Health Collaboratives agreed principles in its considerations</p> <ul style="list-style-type: none"> • Population health at the heart of what we do • Working “as one” for our local communities • Maximising the focus on reducing health inequalities • Enhancing the focus on population mental health outcomes • Closer collaboration across pathways of care • Transformation based on clinical co-production and co-design • Commissioning, provider, experts by experience skills and expertise • Equal engagement of all key partners in transformational change <p>The work of the committee will oversee the achievement of the Collaboratives strategic priorities focusing on population mental health and prevention, providing integrated care and sustainable high quality care pathways..</p>
-----------------------	---

	<p>The Committee will not have statutory legal responsibilities for partner organisations under the Partnership Agreement, and will not affect or replace the statutory responsibilities and accountabilities of each partner.</p> <p>The Committee is a decision-making forum. It will receive assurance and consider proposals and strategic plans that have been co produced by the clinical experts and experts by experience through the Partnership Collaborative Executive</p> <p>The Committee will report and provide assurance to the HWHCT Board and provide assurance to Partners.</p> <p>The Committee will report and provide assurance to place based Executives (namely Worcestershire Executive Committee and 1 Herefordshire) working on behalf of place to deliver the national MH Long Term Plan priorities and enabling integration at place/District/PCN as appropriate.</p> <p>The governance architecture for Mental Health Collaborative and Lead Provider commissioning responsibility is enclosed at Appendix A</p> <p>The committees summary purpose is to:</p> <ul style="list-style-type: none">• Be assured that the principles agreed above are enacted in the work of the Collaborative, particularly the engagement of partners and clinically led, coproduced service and care pathways improvement.• Ensure oversight of strategic, quality and financial planning and performance of in scope services in delivering the requirements of the Mental Health Long Term Plan, ICS and HWBB Mental health Strategy and agreed Commissioning Intentions• Receive evidence and assurance from the Collaborative Executive that required quality, performance and financial standards and outcomes are delivered across all providers with associated risks identified and mitigated• Recommend commissioning decisions that reduce unwarranted variation in the range and quality of services available to users, by driving up outcomes overall• Be assured that clinical and professional standards are consistently met across providers• To seek assurance that appropriate financial governance is in place securing value for money and sound financial stewardship• Review and, within delegated powers approve, system-wide investment cases, focusing on transformational investment.
--	---

Key Responsibilities

- To receive information and assurance of the current status of partnership and collaborative working and promote and support ongoing development of the Collaborative
- To seek assurance of compliance with the requirements of the NHS Long Term Plan (LTP), ICS and HWB Strategies and Commissioning Intentions
- To seek information on service need issues, strategic planning, commissioning, contracting and delivery and be assured that any risks are recorded, monitored and that mitigation plans are in place.
- To provide assurance and reporting arrangements into the HWHCT Trust Board, ICB, HWBB, Worcestershire Executive Committee, 1 Herefordshire and other Partners bodies that are transparent, comprehensive and effective.
- To seek assurance that the relevant processes and policies are in place to deliver improvements in service delivery through commissioning and contracting.
- To monitor and be assured that priorities identified in the quality assurance monitoring process are addressed effectively resulting in quality improvement.
- To actively promote continuous improvement across services including organisational development
- To encourage innovation and sharing of best practice across the Collaborative, including the adoption of new roles or ways of working.
- To receive assurance that services that work to eliminate discrimination, advance equality of opportunity and foster good relations to colleagues and patients alike.
- Be assured that appropriate public engagement and, where necessary, consultation is undertaken and that the views of patients and other stakeholders is appropriately considered and used to inform proposals.
- Receive and agree the principles for commissioning intentions each year, to inform consideration and approval by the Board of Directors.
- Receive and approve commissioning plans, informed by deliberations by the Executive
- Receive and consider business cases for services to be developed or delivered within the Provider Collaborative
- Receive strategies for key enablers, such as workforce and data sharing.
- Receive reports on provider performance with recommendations from the Executive regarding escalation of performance issues and action that may be required.
- Determine or resolve any matter referred to it by the Steering Group or any dispute in accordance with the MoU/Partnership Alliance Agreement (TBC)
- Review and approve any changes to the Terms of Reference for the Executive.

Membership	<ul style="list-style-type: none"> • Non-Executive Director (Chair) • 2 further Trust Non Executives • Trust Chief Executive • Director of Finance • Chief Operating Officer • Director of Nursing and Quality • Representative/s from each of the following: <ul style="list-style-type: none"> ○ Worcestershire CC (Adults and Childrens – ie 2) ○ Herefordshire CC ○ Voluntary Sector (1 per place i.e. 2) ○ PCNs Strategic Leads (1 per place i.e. 2) ○ NHSEI ○ Healthwatch (Herefordshire and Worcestershire (1 per place i.e. 2) ○ H&W Integrated Care Board MH lead (<i>note whilst in transition this will be 3 representatives from HW CCG – MH lead, Deputy CFO and Director of Strategy</i>) <p>A Vice Chair may be appointed from the Trust Non Executive membership</p> <p><i>The Committee will strive to work constructively and pragmatically with partners to reach a consensus position where all agree.</i></p>
In attendance (where required)	Relevant Programme Leads as invited by the Chair. <ul style="list-style-type: none"> • Director of Strategy and Partnerships • Medical Director • Director of Workforce
Chair	Non-Executive Director. In the absence of the Chair the Deputy will be an alternative Non-Executive Director.
Quorum	6 members, which must include a Non-Executive Director, a Trust Executive and 50% of partners
Frequency	The Mental Health Collaborative Committee will meet bimonthly. Members will be required to attend 80% of meetings a year.

<p>Roles and Responsibilities</p>	<p>Members will be expected to provide reports for the committee within given deadlines, using the standard template as per the annual work plan.</p> <p>Members are expected to have prepared for the meeting in advance by reading the meeting papers.</p> <p>Members are expected to feedback to constituency groups and sectors, and represent their organisational view</p> <p>Committee members will be asked to bring back learning and information from relevant local, national reports and events to ensure the Collaborative is pro-actively responding to national and regional developments and is embedding shared learning.</p>
<p>Administration</p>	<ul style="list-style-type: none"> ➤ Committee administrative support will be provided by HWCHCT ➤ A schedule of dates will be issued for 12 months ➤ Papers will be circulated 7 days before the meeting date