

# Appendix 1

## PART 2 - Procedural Rules

### **BRENT COUNCIL STANDING ORDERS**

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42 (l) A motion or amendment to a motion which has not been moved may be withdrawn ~~or altered~~ by the proposer of the motion or amendment, a motion of amendment to a motion which has been moved may be withdrawn or altered by the proposer of the motion or amendment with the consent of Full Council, which shall be signified without discussion by a show of hands and/or by a roll call. Where a motion is withdrawn there shall thereafter be no further debate on the item.

## PART 4 - MEMBERSHIP AND TERMS OF REFERENCE OF COUNCIL COMMITTEES AND SUB-COMMITTEES

### Health and Wellbeing Board Membership

#### Membership

##### *Voting Membership*

- Five elected councillors to be nominated by the Leader of the Council. Four councillors will be Cabinet members from the majority party. The fifth member will be an opposition member. An elected councillor will chair the Health and Wellbeing Board.
- Four representatives of ~~North West London~~Brent Integrated Care ~~System Executive (i.e. the Integrated Care Board)~~Partnership Executive
- A representative of Healthwatch
- A representative of the nursing and care home sector

##### *Non-voting Membership*

- Chief Executive, London Borough of Brent
- Corporate Director, Adult Social Care and Health
- Corporate Director, Children and Young People
- Director of Public Health
- Director of Adult Social Services

An elected councillor will chair the Health and Wellbeing Board.

At least one of the North West London Integrated Care System members shall be a GP. This member will also take on the role of Vice Chair of the Health and Wellbeing Board.

All members of the Health and Wellbeing Board have voting rights, except council officers.

The quorum for the Health and Wellbeing Board is four voting members, with at least two councillors and two other voting members (one of which must be a

member of the Brent Integrated Care Partnership present in order for a meeting to take place.

## Terms of Reference

Brent's Health and Wellbeing Board will:

1. Lead the improvement of health and wellbeing in Brent, undertaking duties required by the Health and Social Care Act 2012.
2. Lead the needs assessment of the local population and subsequent preparation of the borough's Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy. It will ensure that both are updated at regular intervals and that integrated care strategies that are prepared by the Brent Integrated Care Partnership (Brent ICP) are taken into account in this process.
3. Oversee the implementation of the priorities in the Joint Health and Wellbeing Strategy and other work to reduce health inequalities in Brent.
4. Promote integration and partnership working between health and the council, including social care and public health, across all ages by providing steer and oversight to the Brent ICP board to meet borough's health and wellbeing.
5. Develop initiatives between partners to maximise opportunities for early intervention and prevention.
6. Provide leadership to partner agencies on tackling health inequalities resulting from disparities in housing, education, climate emergency, air quality, physical activity, disability and poverty.
7. Review and respond with its opinion on the Forward Plans that are provided by the North West London Integrated Care System and if appropriate within its discretion, give its opinion on the Forward Plans to NHS England.
8. Contribute to the implementation of strategies developed by partners such as the council's Borough Plan, the NHS Long Term Plan and the Office for Health Improvement and Disparities.
9. Seek assurance of partner plans to responding to a health related emergency, e.g. pandemics.
10. Oversee and ensure publication of ~~Agree the~~ borough's Pharmaceutical Needs Assessment, which is updated every three years.
11. Agree an annual work programme for the Board.
12. Consider representations from Brent Scrutiny Committees and Healthwatch Brent on matters within the remit of the Health and Wellbeing Board.

13. To receive updates on partner investments into the local health and wellbeing system and make representations at local and national level on sufficiency of resources (e.g. finance, estates and workforce).