

Generic Terms of Reference for Healthwatch Kingston Task Groups

Introduction

This updated Generic Terms of Reference for Healthwatch Kingston Task Groups includes a mechanism for the nomination of a both Chair and Vice-chair for each Task Group, so that an option for cover and succession planning exists should a Chair not be available or steps down during their term. Nominations for Task Group Chairs and Vice-chairs will need to be approved by the Board.

Generic Task Group Terms of Reference

1. Aim

1.1. The aim of the Task Group is to support Healthwatch Kingston upon Thames (hereafter HWK) to deliver its health and social care work programme with a specific focus on the commissioning and delivery of mental health, hospital services, community care and learning disability services and how they relate to the system as a whole. Youth Out Loud! (YOL!), a 'task group' for young people, operates under different Terms of Reference. (link to new website page)

2. Objectives

- 2.1. To propose an annual priority research project and work plan, in line with the strategic objectives of HWK's work plan, for review by the Chief Officer and then endorsement by the Board as set out in the HWK Decision-Making Policy & Procedure. (link to new website page)
- 2.2. To gather feedback from local people on health and social care issues, passing this on to the staff team and the Board as appropriate. Feedback may be sought from a variety of methods and sources such as:
 - 2.2.1. Surveys and questionnaires
 - 2.2.2. Focus groups
 - 2.2.3. Health and social care specific meetings (e.g. NHS Trust Board public meetings, network meetings, voluntary and community sector meetings)
 - 2.2.4. Enter & View visits
 - 2.2.5. Care Quality Commission inspection reports
 - 2.2.6. Other available information
- 2.3. To review project work plan progress at each meeting to ensure the Task Group remains focused on delivering project aims.

3. Accountability

- 3.1. The Task Group will work with the staff team and be accountable to the Board who will be responsible for deciding if the Task Group is meeting its objectives and functioning effectively
- 3.2. The Task Group will provide updates for each Board meeting and will liaise with other Task Groups if there are areas that require a shared approach
- 3.3. The Task Group is expected to act at all times in accordance with HWK's Policies & Procedures (link to new website page)

4. Working Arrangements

- 4.1. The Task Group will propose a Chair and Vice-chair by consensus by the beginning of February for appointment by the Board. Both Chair and Vice-chair, must be an Active Affiliate (see Volunteering Policy) (link to new website page) and will be responsible, with staff team support, for deciding the agenda for meetings. Representatives of health or social care providers on the Task Group are excluded from appointment as Chair or Vice-chair, in order to minimise potential conflicts of interest.
- 4.2. The appointment of the Chair and the Vice-chair must be approved by the Board prior to the start of the business year (from 1 April) and will be for a period of three years (hereafter known as one term) unless determined otherwise by the Board
- 4.3. The Chair and the Vice-chair can be asked to serve more than one term consecutively subject to Board approval but no more than two consecutive 3-year terms (a maximum of six years)
- 4.4. If the Chair steps down in the middle of their term, Task Group members will be required to nominate a new Chair and the Vice-chair of the Task Group will then step up as Acting Chair, while a new Chair is approved by the Board. If the Task Group nominates the Vice-chair to become the new Chair, then members will need to nominate a new Vice-chair at the same time.
- 4.5. The Chair and the Vice-chair will be supported by the staff team so that they are able to conduct meetings confidently and professionally
- 4.6. The Chief Officer will determine which member of the staff team will provide support for Task Group meetings and will be solely responsible for their line management
- 4.7. A schedule of meetings will be planned at the start of each business year for a period of twelve months, unless circumstances dictate otherwise
- 4.8. Task Group meetings will normally take place every other month (six per year), although additional meetings may be called to address urgent matters or to respond to essential unplanned activity
- 4.9. Task Group meetings will be aligned to coincide with or run closely aligned to the HWK Open Meetings
- 4.10. Task Group papers (e.g. agenda, meeting notes, reports) will be approved by the Chair (or Vice-chair in the absence of the Chair) prior to distribution by a member of the staff team

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- 4.11. Papers for each Task Group meeting will be circulated by a member of the staff team at least one week in advance of meetings and published on the HWK website unless office circumstances dictate otherwise
- 4.12. A member of the staff team will take meeting notes and, if required, will report back any urgent matters or issues of concern to the Chief Officer and/or Board as soon as possible
- 4.13. Notes of each Task Group meeting will be circulated no later than three weeks after each meeting
- 4.14. Reports or any other document that are produced by the Task Group must be reviewed by the Chief Officer and then approved by the Board before external circulation
- 4.15. In the event of the Chair and Vice-chair not being present at a meeting, the Task Group should appoint a Chair for the meeting
- 4.16. In the absence of volunteers from the existing membership of the Task Group, the Board might choose to recruit and appoint people from outside of the Task Group's membership.

5. Membership

- 5.1. Membership is on a voluntary, informal basis and is open to any local resident with an interest in health and social care services
- 5.2. Where appropriate new members are encouraged to join HWK as an Active Affiliate so that they can participate in, for example, Enter & View visits
- 5.3. If possible, new members will be briefed by a member of the staff team and/or the Chair and/or Vice-chair of the Task Group prior to their first meeting so that they understand, these Terms of Reference, the project work action plan and relevant policies and procedures (e.g. Safeguarding) (link to new website page)
- 5.4. If necessary, the Task Group Chair and/or Vice-chair will remind those present at meetings of these Terms of Reference
- 5.5. The Board may remove any Task Group members or Active Affiliates who fail to abide by the Code of Conduct (link to new website page) and any other policies and procedures which apply to Task Group activities
- 5.6. All Trustees will be ex-officio members of any Task Group
- 5.7. To function effectively group membership should be no more than 12 with the option of inviting more Active Affiliates for occasions such as visiting speakers, priority setting workshops or other activities as determined by the Chair and/or Vice-chair in liaison with the Chief Officer
- 5.8. Representatives from health and social care services may be invited at the Task Group's discretion.

6. Expected Behaviours

- 6.1. Task Group members are expected to:
 - a. Read the papers prior to each meeting so that they can make a meaningful contribution and participate effectively at each meeting
 - b. Follow up on any actions assigned to them within the deadline given and report back at the next meeting or as agreed by the Task Group
 - c. Adhere to the Privacy Statement (link to new website page) to ensure that information and data is stored and circulated in an appropriate way
 - d. Abide by the Meeting Code of Conduct (link to new website page) and any other policies and procedures which apply to the work of the Task Group
 - e. Draw on their knowledge and experience to assist the Task Group to fulfill its objectives but should not pursue individual concerns to the detriment of the Task Group's performance

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7.2 Active Affiliates who have been appointed to represent HWK on outside bodies should present views that are consistent with HWK's mission and not pursue personal agendas; any conflicts of interest should be declared in accordance with the Conflicts of Interest Policy & Procedure. (link to new website page)

7. Amendments to the Terms of Reference

7.1. Active Affiliates and members can propose amendments to these Terms of Reference which should be put in writing and discussed with the Chair and/or Vice-chair who will decide whether to submit to a Task Group meeting for discussion. If agreed the Chair and/or Vice-chair will submit a revised document clearly showing the proposed amendments to the Chief Officer for review before it is submitted to the Board for approval.

8. Document Control

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