

### Introduction

This document sets out the ways in which the partner agencies that comprise the East Kent Health Improvement Partnership (EKHIP) will work together to deliver improved health and wellbeing at an East Kent level, with specific focus on those issues that cannot be effectively addressed at a district level, but which might not be prioritised at a Kent and Medway regional level.

The composition of the EKHIP recognises the need for and the value of a coordinated, partnership approach to addressing shared health and wellbeing needs and related problems across the East Kent sub region.

It also recognises the value of working sub regionally to reflect structural arrangements of key partners, as well as the value of a single voice at a regional level.

### Partnership environment

The EKHIP sits within a wider framework of partnerships. See Appendix 1 for more detail and a map of the partnership environment and governance.

### EKHIP vision

The EKHIP will deliver, through effective partnership working, continuous improvement in health and wellbeing services for the people of East Kent. This will include a shared East Kent priority setting process, which will inform co-commissioning and district priority setting arrangements.

### EKHIP aims and objectives

Working on a regional level, the EKHIP will:

- Seek to reflect the updated aims and objectives of the KMJHWP and support sub regional delivery of these in any way possible
- Ensure that the needs and priorities of East Kent residents as identified by EKHIP are adequately reflected within the work and approach of the KMJHWP
- Escalate issues to the KMJHWP, where they cannot be addressed at an East Kent or Local level

Working on a sub-regional level, the EKHIP aims to:

- Take advantage of the synergies of working on a sub-regional basis to deliver agreed priority outcomes by:
- Address issues health and wellbeing issues that are difficult to address at a local borough level whether that be due to:
  - Geographical focus of some partners
  - Complexity or scale of issue
  - Where a coherent approach is important to achievement e.g. behaviour change campaigns
  - A single lobbying voice is needed
- Deliver activity against an agreed cross cutting priority where there is advantage in working together e.g. co-design, co-commissioning etc.

- Ensure effective strategic planning and use of resources - as well as a coordinated approach to meeting any related statutory requirements and targets
- Agree an annual sub-regional priority through the agreed partnership framework process – this will allow for effective sub regional working and exploitation of synergies in order to maximise resources (including co-commissioning) and outcomes

## Membership

The following organisations/departments/roles are represented:

Organisation	Position
Ashford Borough Council	Chief executive
	Cabinet member for
Canterbury City Council	Chief executive
	Lead member
Dover District Council	Chief executive
	Cabinet member
Folkestone and Hythe District Council	Chief executive
	Cabinet member
Thanet District Council	Chief executive
	Cabinet member
Kent County Council	Director of public health
	Director of partnerships
East Kent Clinical Commissioning Group (CCG)	Clinical Chair
	Chief GP commissioner
Kent Community Health NHS Trust (KCHFT)	Chief executive officer
Kent and Medway NHS and Social Care Partnership Trust (KMPT)	Chief executive officer
East Kent GP Federation...	

All partner organisations have one vote per organisation.

Individuals and organisations with known expertise and knowledge may be requested to attend meetings as observers. Observers may participate in meetings but shall have no decision-making powers. If a member would like an observer to attend a meeting, they should seek the permission of the group.

## Quorum

A valid quorum for meetings is half of the members with the right to be heard. This is the minimum requirement for a decision to be taken. No decision shall be taken without:

- One local authority representative
- One CCG representative
- One provider representative

## Membership expectations

- To attend the meetings of the EKHIP and when they cannot attend to send a named deputy who has been briefed prior to their attendance. The named deputy will have full voting rights
- To have authority to be able to take action and make decisions as required
- To commit to developing an appropriate level of understanding around health and wellbeing issues, policy and practice as required
- To work together productively to overcome any cross-organisational barriers
- To take the lead on the delivery of specific priorities or actions as required

## **Chair**

The location of the EKHIP will rotate across each of the local authority areas in turn. The Chair of the meeting will be the Lead Member for the local authority area the meeting is being held in.

## **Administrative support**

Administrative support will also be provided by the local authority the meeting is being held in.

## **Meeting frequency**

The EKHIP will meet quarterly, with an agreed timeline to allow for the most effective working. During the priority setting process meetings will be more frequent as required.

## **Subgroups**

The East Kent Public Health Strategic Leads group will form the steering group for this group. The group will take responsibility for forward planning and agenda planning for the EKHIP. It will also take on any delivery of activity as required by the EKHIP.

Any further sub groups will be established as required on a task and finish basis.

## **Representation at KMJHWB**

The EKHIP will represent at the KMJHWB as required, with a representative agreed by the EKHIP as required.

## **Confidentiality**

All EKHIP members have a duty of confidentiality regarding all information disclosed, shared and discussed between and during meetings. There will be occasions when selected information must not be disclosed outside the EKHIP. The person disclosing such information to the EKHIP is responsible for identifying it as confidential at the time it is given, and for ensuring that its confidential status is identified in all relevant written material. Any challenge to the confidentiality of information given to the EKHIP will be referred to the Chair, whose decision on the matter will be final.

## Appendix 1

### Kent and Medway Joint Health and Wellbeing Board

The Kent and Medway Joint Health and Wellbeing Board (KMJHWP) is an advisory sub-committee which operates to encourage persons who arrange for the provision of any health or social care services in the area to work in an integrated manner and for the purpose of advising on the development of the Sustainability and Transformation Partnership (STP) Plans for Kent and Medway. The KMJHWP seeks to:

- Ensure collective leadership to improve health and wellbeing outcomes across both local authority areas, to enable shared discussion and consensus about the STP across the Kent and Medway footprint in an open and transparent way.
- Help to ensure the STP has democratic legitimacy and accountability, to seek assurance that health care services paid for by public monies are provided in a cost-effective manner.
- Consider the work of the STP and encourage persons who arrange for the provision of any health or social care services in the area to work in an integrated manner.
- Take account of and advise on the wider statutory duties of health and social care partners.

### District level arrangements

The EKHIP will feed into the district level health and wellbeing partnerships / mechanisms, (flesh out as required based on other districts) acting as a conduit of information and decision making.