



Mental Health Partnership Board Terms of Reference

(Revised November 2011)

1. Introduction

- 1.1 The Mental Health Partnership Board (MHPB) is the inter-agency mechanism in Barnet to improve the health and well-being of people in Barnet (aged 18-64 years) who suffer from a mental illness and their carers.
- 1.2 The MHPB will also work collaboratively with other boards to ensure that transition arrangements are effective. For example, the Older Adults Partnership Board will lead on Dementia and mental health needs of older adults but will inform and/or involve the MHPB as appropriate.
- 1.3 The MHPB has strategic and advisory functions and plays a crucial role in influencing the shape of mental health services and policies by:
 - active involvement in developing strategies and action plans
 - overseeing the implementation of agreed strategies and action plans.
- 1.4 The Health and Well-being Board (HWBB) has delegated these responsibilities to the Board. The Board has responsibility for overseeing the implementation of integrated commissioning strategies in Barnet.
- 1.5 National and local priorities will inform the work of the Board, these include:
 - Barnet's Sustainable Community Strategy
 - NHS Commissioning Strategic Plan
 - the Council's Corporate Plan
 - Future Shape
 - NHS Barnet Operating Framework
 - New Horizons in Mental Health

2. General Responsibilities

- 2.1 The MHPB has the following responsibilities:
 - Helping identify what services people with mental health problems and their carers need in Barnet
 - Increasing understanding of what works, service gaps and what people with mental health problems and their carers value most
 - Supporting the development of strategies and work plans
 - Reviewing and overseeing the implementation of strategies and work plans
 - Promoting wider involvement and participation
 - Consulting and communicating with wider stakeholders including users and carers to aid the priority setting process
 - Agreeing priorities and making recommendations on the above
 - Ensuring effective handover and transition arrangements for young people and older adults

3. Accountability

- 3.1 The MHPB is accountable to the Health and Well-being Board (HWBB).
- 3.2 The HWBB has responsibility for agreeing the establishment and dissolution of the MHPB.
- 3.3 The MHPB sets its own terms of reference in line with the functions that the HWBB requires it to perform.
- 3.4 The HWBB gives direction to the work of the MHPB.
- 3.5 The MHPB on an annual basis will submit a report to the HWBB setting out its achievements for the year and its forward work programme for the year ahead. The HWBB has responsibility for signing off the MHPB's work programme.
- 3.6 In reviewing the MHPB's work, the HWBB will review how the Board involves wider stakeholders including people with mental health problems and their carers in its work.
- 3.7 The Co-chairs of the MHPB will meet twice a year with the Chair of the HWBB to facilitate good communication, agenda setting and risk management. The MHPB can propose items to be included on the forward plan for the HWBB through the Co-chairs of the MHPB.

4. Membership

- 4.1 Membership to the Board is as listed in the table below. The Board aims to ensure that 50% of its membership includes people with mental health problems and family carers.
- 4.2 Members will be responsible for representing the views of services users, carers or groups to the board and report back to their groups or organisations.
- 4.3 Members will also be responsible for letting the Chair know when they are representing their own personal views.
- 4.4 The MHPB will comprise the following members:

Service User Representatives
Carer Representatives
Barnet CouncilRepresentatives
NHS Barnet Representatives
Voluntary Organisations Representatives
Commissioning Representatives
Mental Health Trust Representatives
Other

Other representatives may be invited by the Chair to attend meetings where relevant.

- 4.5 The MHPB will be co-chaired by the Director of Planning and Commissioning/ Assistant Director of Planning and Commissioning (or an officer he/she may nominate) and an elected service user representative.
- 4.6 Members are able to delegate to a deputy of suitable authority if they are unable to attend by agreeing this with the Chair.
- 4.7 This membership arrangement will be reviewed annually to make sure that the MHPB membership continues to reflect the wide diversity of service users and carers in the borough.

4.8 Code of Conduct

To ensure the smooth running of the Board and that we hear the views of everyone, members are asked to observe the ground rules outlined in Appendix 1.

4.9 Confidentiality

The Board will keep a record of names and contact details of everyone attending meetings. The names and contact details or service users and carers will not be published in public documents without prior agreement.

4.10 Conflicts of Interest

Members should let the Chair or the Partnerships and Governance Officer know if they are involved with anything which might affect the decisions that they make (conflicts of interest).

5. Working Groups

- 5.1 Working groups or sub-groups may be set up to undertake specific tasks of the MHPB work plan.
- 5.2 The working groups will be chaired by an elected Board representative and report back to the MHPB.
- 5.3 Working groups/subgroups can also be set up in conjunction with other Partnership Boards to work on cross cutting issues, for e.g. Housing, employment, volunteering.

6. Meetings

- 6.1 The Board meetings are divided into two sessions, which will be open to all members of the Board:
 - Workshop sessions
 - Business sessions
- 6.2 The structure of the meetings will be kept under review to ensure that the Board remains effective.
- 6.3 Frequency of meetings

The Board will meet at least four times a year.

6.4 Quorum

A quorum will comprise six members of the Board provided this consists of the Chair and at least one representative of the Council, NHS Barnet, the voluntary sector, service user and carer.

- 6.5 All meetings will be held in venues which are accessible to all.
- 6.6 Administration of meetings

The Partnership and Governance Officer and the User and Carer Involvement Officer shall support the work of the MHPB.

- 6.7 Members of the MHPB shall be involved in agreeing a work plan for the board
- 6.8 The agenda and associated papers of each Board meeting will be sent to members no less than five working days before the date of the meeting.

- 6.9 The co-chairs will have the discretion to accept late items and associated papers provided the reason for their urgency is accepted and reported to members accordingly.
- 6.10 A minute of discussions at meetings will be recorded. These minutes will be made available on the Council and Primary Care Trust websites.
- 6.11 Reports to the Board will be written in plain English and will contain simple explanations of key issues including its purpose for e.g. if it is for Information, for comment, for decision.

7. Annual review

7.1 These arrangements will be subject to further changes and regular reviews in light of the recent White Paper on the National Health Service and as directed by the HWBB.





Appendix 1:

Mental Health Partnership Board Code of Conduct

The Board has agreed to this code of conduct to make sure that everyone feels safe and can fully participate in meetings. The Code of Conduct will be reviewed annually.

Board members are asked to:

- Be friendly, polite and courteous.
- If you have a criticism, make it helpful and constructive. Think about and offer a solution
- Be objective and fair.
- Be open and honest.
- Be respectful of other people's views and opinions.
- Listen to other people without interrupting.
- Try to be on time. Let us know if you are unlikely to attend a meeting or will be late or leave early.
- If you are able to read the meeting papers beforehand it would be appreciated as it helps discussion.
- Members are welcome to use personal experiences in discussions about services and patient care. However, if you have a formal complaint, it needs to be dealt with outside the Board.
- Respect people's confidentiality. Do not use any personal information outside the Board meetings.

The Code of Conduct above is as revised by the Mental Health Partnership Board in March 2013.