North Central London ICS People Board Terms of Reference

1. Introduction

- 1.1 The North Central London Integrated Care System People Board ('People Board') is established in accordance with the Constitution of NHS North Central London Integrated Care Board ('ICB'). It is a committee of the ICB's Board of Members which will oversee the development and delivery of the Integrated Care System's strategic approach to people.
- 1.2 These Terms of Reference set out the membership, remit, responsibilities and reporting arrangements of the People Board.

2. Purpose

- 2.1 The purpose of the People Board is to:
 - a. Provide strategic leadership and oversight of the delivery against people priorities including those within NCL strategic transformation programmes;
 - b. Work together to co-design, promote and deliver the strategic vision for workforce across the ICS and amongst its member organisations and staff;
 - c. Agree key priorities, programmes, and projects for developing and improving the experience, recruitment, and retention of staff;
 - d. Optimise the current workforce and build the future workforce required within health and social care in NCL to continue to deliver sustainable high-quality care for the populations that NCL serve;
 - e. Ensure that NCL ICS leverages the research, education, data and technology assets within the sector to drive innovative and future-focussed workforce transformation:
 - f. Champion equality and diversity, and challenge inequalities;
 - g. Identify and mitigate against strategic and programme risks;
 - h. Ensure interdependencies with other programmes and projects are understood, managed and communicated;
 - i. Promote engagement in programmes, projects and initiatives and progress on people matters within the ICS;
 - j. Feedback and act on new priorities and challenges across the NCL workforce;
 - k. Utilise Board members' influence to champion the NCL workforce programme, acting as advocates for innovation and change;
 - I. Enhance and accelerate programme benefits and outcomes across the health and care sector;
 - m. Challenge NCL organisations and the ICS effectively and constructively;

- n. Support NCL workforce programme delivery, ensuring quality and tracking of benefits and resource prioritisation;
- Ensure effective utilisation of available resources and funding for people development to ensure effective deployment (recognising that statutory accountability may lie elsewhere);
- p. Adhere to the NHS's 'people promise' and principles of public life (Nolan principles) and uphold the values of the NHS and public sector.

3. Role

3.1 The People Board will:

- a. Oversee the development and delivery of the NCL ICS People Strategy and associated plan;
- b. Recommend the NCL ICS People Strategy to the ICB's Board of Members for approval and ongoing reviews of the strategy;
- c. Commit NCL to action, to deliver against the People Strategy;
- d. Ensure the People Strategy is delivering against the objectives of the ICS;
- e. Communicate and engage with NCL workforce, promoting NCL People Strategy, workforce programmes and priorities;
- f. Identify and act on opportunities for cooperation and delivery of priorities;
- g. Support retention and recruitment of staff across NCL, and act as enablers and champions of system change;
- h. Agreeing reprioritisation of appropriate ICS People funds within existing budgets.

4. Membership

- 4.1 The People Board shall comprise of the following voting members:
 - **ICB**
 - a. Non-Executive Member, NCL ICB;
 - b. Chief Executive, NCL ICB;
 - c. Chief People Officer, NCL ICB;
 - d. Chief Nursing Officer, NCL ICB;
 - e. Partner Member, NCL ICB.

Integrated Care System Partners

- a) The following sector members who bring sector experience and perspective to the People Board's deliberations:
 - i. Three from HR/People;
 - ii. Three from Nursing;
 - iii. Two from Medical;
 - iv. One from Pharmacy;
 - v. Two from Higher Education institutions:
 - vi. One from the NCL Training Hubs;
 - vii. One from Adult Social Care;
 - viii. One from a Local Authority (non-Adult Social Care);

- b) One representative from the North Central London GP Provider Alliance;
- c) Two representatives from the North Central London Voluntary, Community and Social Enterprise ('VCSE') Alliance;
- d) One representative from Skills for Care;
- e) Two representatives from the Workforce, Training & Education Directorate of NHS England (previously Health Education England) one of whom shall be a Dean;
- f) One ICS representative for Equality, Diversity and Inclusion;
- g) One Academic Health Science Network representative;
- h) Two representatives from the Allied Health Professionals Council or Faculty.
- 4.2 The roles referred to in the list of voting members above describe the substantive roles and any equivalent successor roles and not the individual title or titles.
- 4.3 In accordance with the ICB's Constitution all voting members of the People Board must be approved by the ICB's Chair.
- 4.4 The list of voting members is set out in Schedule 1. Schedule 1 does not form part of the Terms of Reference and may be amended without the need to formally amend these Terms of Reference.
- 4.5 Voting members may nominate deputies to represent them in their absence.

5. Participants and Observers

- 5.1 The list of standing participants is contained in Schedule 1. Schedule 1 does not form part of the Terms of Reference and may be amended without the need to formally amend these Terms of Reference.
- 5.2 Participants at People Board meetings are non-voting.
- 5.3 The roles referred to in the list of standing participants describe the representation/roles and any equivalent successor representation / roles and not the individual title or titles.
- 5.4 Standing participants are not permitted to nominate deputies to represent them in their absence unless prior agreement is permitted by the People Board Chair.
- 5.5 The People Board may invite or allow additional people to attend meetings as participants. Participants may present at meetings and contribute to the relevant discussions but are not allowed to participate in any formal vote.
- 5.6 The People Board may invite or allow people to attend meetings as observers. Observers may not present at meetings, contribute to any discussion or participate in any formal vote.
- 5.7 The People Board may call additional experts to attend meetings on a case by case basis to inform discussion.

6. Chair

6.1 The People Board Chair shall be an NCL ICB Non-Executive Member. The Chair may nominate a deputy to represent them in their absence.

7. Voting

- 7.1 The ICB has agreed to use a collective model of decision making that seeks to find consensus between system partners and make decisions based on unanimity as the norm. This includes working though difficult issues where appropriate. If it is not possible to achieve unanimity a vote will be required. Voting shall be as per clause 7.2 below.
- 7.2 Each voting member of the People Board shall have one vote with resolutions passing by simple majority. In the event of a tied vote the People Board Chair shall have the casting vote.

8. Quorum

- 8.1 The People Board will be considered quorate when at least 30% of the voting members are present including the Chair (or the Deputy Chair if the Chair is unable to attend or is excluded due to conflicts of interest) and one ICB officer member.
- 8.2 If any representative is conflicted on a particular item of business they will not count towards the quorum for that item of business. If this renders a meeting or part of a meeting inquorate a non-conflicted person may be temporarily appointed or co-opted onto the People Board to satisfy the quorum requirements
- 8.3 If a meeting is not quorate the People Board Chair may adjourn the meeting to permit the appointment or co-option of additional members if necessary.

9. Secretariat

9.1 The Secretariat to the People Board shall be provided by the Corporate Affairs Directorate.

10. Frequency of People Board Meetings

10.1 People Board meetings will be held quarterly but may hold additional meetings as and when necessary. The People Board Chair may call additional meetings or cancel meetings as necessary.

11. Notice of Meetings

11.1 Notice of a People Board meeting shall be sent to all People Board members no less than 7 days in advance of the meeting.

12. Agendas and Circulation of Papers

- 12.1 Before each People Board meeting an agenda setting out the business of the meeting will be sent to every People Board member no less than 7 days in advance of the meeting.
- 12.2 Before each People Board meeting the papers of the meeting will be sent to every People Board member no less than 7 days in advance of the meeting.
- 12.3 If a People Board member wishes to include an item on the agenda they must notify the People Board Chair via the Secretariat no later than 7 days prior to the meeting. The decision as to whether to include the agenda item is at the absolute discretion of the People Board Chair.

13. Minutes of Meetings

13.1 The minutes of the proceedings of a meeting shall be prepared by Secretariat and submitted for agreement at the following meeting.

14. Authority

- 14.1 The Committee is accountable to the Board of Members and will operate as one of its committees.
- 14.2 The People Board must act within the remit of these terms of reference and has no executive powers other than those specifically set out in these terms of reference.

15. Reporting Responsibilities

- 15.1 The People Board will report to the ICB Board of Members on all matters within its duties and responsibilities.
- 15.2 The People Board may make recommendations to the ICB Board of Members or any other forum across the Integrated Care System it considers appropriate on any area within its remit.

16. Delegated Authority

16.1 The People Board may agree to delegate its authority to a People Board member or members to make decisions on the People Board's behalf outside of a People Board meeting at its absolute discretion on a case by case basis.

17. Virtual Meetings and Decision Making

- 17.1 It is a principle of the People Board and an expectation that the People Board will meet in person. However, from time to time the People Board meetings may be held virtually if circumstances require.
- 17.2 There are circumstances where time-critical decisions need to be made and it is not possible and/or reasonably practicable and/or a good use of resources to hold a physical meeting (either in person or virtually) in sufficient time. In these circumstances decisions may be made virtually using the protocol for virtual decision making.

18. Sub-Boards, Working Groups and Task and Finish Groups

18.1 The People Board may appoint sub-board, working groups and task and finish groups to advise the People Board and assist it in carrying out its duties. The People Board may not delegate any of its functions, powers or decision making authority to a sub-board, working group or a task and finish group.

19. Conflicts of Interest

- 19.1 Conflicts of Interest shall be dealt with in accordance with the Conflicts of Interest Policy and NHS England statutory guidance for managing conflicts of interest.
- 19.2 The People Board shall have a Conflicts of Interest Register that will be presented as a standing item on the People Board's agenda. In addition, an opportunity to declare any new or relevant declarations of interest will be listed as a standing item on the People Board's agenda.

20. Gifts and Hospitality

20.1 Gifts and Hospitality shall be dealt with in accordance with the Conflicts of Interest Policy, and NHS England statutory guidance for managing conflicts of interest.

20.2 The People Board shall have a Gifts and Hospitality Register and People Board members will have an opportunity to declare any new or relevant declarations of relevant gifts and hospitality as a standing item on the People Board's agenda

21. Standards of Business Conduct

- 21.1 People Board members and any attendees or observers must maintain the highest standards of personal conduct and in this regard must comply with:
 - 21.1.1 The law of England and Wales;
 - 21.2.2 The NHS Constitution:
 - 21.1.3 The Nolan Principles;
 - 21.1.4 The standards of behaviour set out in the ICB's Constitution;
 - 21.1.5 The Standards of Business Conduct Policy;
 - 21.1.6 The Conflicts of Interest Policy;
 - 21.1.7 The Counter Fraud, Bribery and Corruption Policy;
 - 21.1.8 Any additional regulations or codes of practice relevant to the People Board.

22 Review of Terms of Reference

- 22.1 These Terms of Reference will be reviewed from time to time, reflecting the experience of the People Board in fulfilling its functions and the wider experience of the ICB.
- 22.2 These Terms of Reference will be formally reviewed annually. These Terms of Reference may be varied or amended by the ICB's Board of Members.

Date Approved by the Board of Members: 25th July 2023.

Date of Next Review: 24th July 2024.

Schedule 1 List of Members

The voting members of the People Board are:

ICB Members

Position	Name
NCL ICB Chief Executive	
NCL ICB Chief People Officer	
NCL ICB Chief Nursing Officer	
NCL ICB Partner Member	

Integrated Care System Partners Members

Position	Name
Three sector members- HR/People	
Three sector members- Nursing	
Two sector members- Medical	
One sector member- Pharmacy	
Two sector members- Higher Education	
institutions	
One sector member- NCL Training Hubs	
One sector member- Adult Social Care	
One sector member- Local Authority (non-	
Adult Social Care)	
One representative from the North Central	
London GP Provider Alliance	
Two representatives from the North Central	
London VCSE Alliance	
One representative from Skills for Care	
One representative from the Workforce,	
Training & Education Directorate of NHS	
England one of whom shall be a Dean;	
One ICS representative for Equality,	
Diversity and Inclusion;	
One Academic Health Science Network	
representative.	
Two representatives from the Allied Health	
Professionals Council or Faculty.	

People Board Chair (voting member):

Position	Name
NCL ICB Non-Executive Member	