

BOARD	NHS Western Isles - DRAFT
Committee	Population Health and Wellbeing Committee
Composition	<p>3 Non-Executive Directors:</p> <ul style="list-style-type: none"> • Board Chair (Committee Chair) • OHCPP Representative • IJB Representative <p>1 Locality Representative Lewis & Harris</p> <p>1 Locality Representative Southern Isles</p> <p>Appropriate training and development will be provided to ensure that members of the Committee have the skills and knowledge to carry out this role</p>
In attendance	<ul style="list-style-type: none"> • Director of Public Health • Nurse / AHP Director • Consultant in Public Health Medicine • Public Health Manager • Head of Health Intelligence • Health & Social Care Partnership Member (IJB Third Sector Representative) • Wellbeing Group Representative • Equality & Diversity Representative
Attendance as required	<p>Other appropriate staff may attend a meeting, at the request of the Committee Chair in relation to the presentation of information or reports.</p> <p>All Board Members have the right to attend meetings and have access to all papers, except where the committee determines otherwise.</p> <p>Board Members should make a request to the Chair of the Committee if wishing to attend a meeting.</p> <p>Attendees or Non-Executive Directors, who are not part of the composition, who wish to observe the meeting do not have the right to intervene during the meeting and should make any comments in relation to the discussion to the Committee Chair following the meeting.</p>
Executive Lead & their role	Director of Public Health

	Their role is to determine the overall vision and objectives for public health across the Western Isles and advise on the necessary public health priorities.
Admin Support	PA to the Director of Public Health
Quorum	2 Non-Executive Directors +1 Executive Lead + 2 Other Members
No of Meetings	3 per calendar year
Document presentation	<ol style="list-style-type: none"> 1. The Chair will set the agenda in conjunction with the Executive Leads 2. The agenda and supporting papers will be sent out at least five clear working days in advance of the meetings. 3. Notice of each meeting will confirm the venue, time and date, utilising the corporate document template for the agenda. The agenda and shall be made available to each member of the committee sharing documents via Teams. 4. All papers will clearly state the agenda reference, the author, the purpose of the paper and the action the Committee is asked to consider, utilising the corporate document template for the Executive Summary. 5. Formal minutes shall be taken of the proceedings of the Committee. Draft Minutes and Action Plan/Log shall be distributed for consideration and review to the Chair of the Meeting within 5 working days of the meeting except in exceptional circumstances. 6. The draft approved minute will be presented at the subsequent Committee meeting for formal approval. 7. Approved minutes will be included in subsequent Board Meeting papers following approval by the Population Health Committee. 8. An action point or action tracker report arising from the Committee business shall be kept to record, identify and ensure actions are carried out. 9. The Committee Chair will bring to the Board's attention any issues which require escalation.
Reporting / Accountability	NHS Western Isles Board
Appropriate Strategic direction links	NHS Western Isles Public Health Strategy 2025/26 NHS Diversity & Equality Framework NHS Western Isles Health Needs Assessment 2025 NHS Western Isles Health Intelligence Workplan NHS WI Health & Social Care Strategic Framework 2024-27

	NHS Western Isles Anchor Strategy National Population Health Framework
Purpose	To provide oversight and governance to the population health activity undertaken by NHS Western Isles.
Remit	<ol style="list-style-type: none"> 1. The health and wellbeing challenges facing the Western Isles population are complex. Poor health has significant impacts on the quality of life of individuals and translates into additional demand on our health and social care system, a demand which is forecast to increase over the next decade. 2. Increasing healthy life expectancy and reducing health inequalities are two of the biggest challenges we face. The Public Health Reform programme jointly led by Scottish Government and COSLA has recognised the need for collective leadership and a system wide approach to tackle these challenges. There are now strong expectations that robust assurance mechanisms are in place to ensure delivery of actions to improve public health. 3. It must be recognised that much activity, which supports Population / Public Health is undertaken by or in partnership with other public sector, Third Sector organisations and with local communities and such activities should also report into the relevant governance structure with joint working reporting to the appropriate Community Planning Partnerships. 4. The Population Health and Wellbeing Committee will provide assurance that NHS Western Isles meets its obligations across a range of activities including: <ol style="list-style-type: none"> a. providing assurance to the NHS Board that public health governance is being discharged in relation to the Board's statutory duty for quality of care and protection and improvement of the health of the population. b. ensuring there is development and implementation of work at strategic and operational levels to underpin a system wide approach to addressing the Public Health Priorities, with a specific focus on improving population health and wellbeing and addressing inequalities. c. monitoring key public health measures with a clear focus on inequalities and diversity and inclusion. d. providing leadership to reshape NHS Western Isles services to have a greater emphasis on prevention, early intervention and tackling inequalities. e. promoting effective partnership working arrangements ensuring a whole a whole systems approach between

	<p>NHS Western Isles, the Health and Social Care Partnership, the Local Authority, the Community Planning Partnership, Third Sector and local Communities to improve population health and wellbeing and reduce health inequalities.</p> <p>f. providing leadership and advocacy for public health work in the Western Isles.</p> <p>5. The Population Health and Wellbeing Committee will:</p> <p>a. Receive reports on regional work plans for key population health improvement areas including health inequalities led by NHS Western Isles and Health and Social Care Partnership.</p> <p>b. Scrutinise and discuss key population health indicators, particularly in relation to population harms.</p> <p>c. Consider national developments in Public Health and their implementation in the Western Isles.</p> <p>d. Receive and discuss reports relating to emerging threats to public health in the Western Isles and their mitigations</p> <p>e. Receive reports relating to:</p> <ul style="list-style-type: none"> ▪ Health Protection Incidents ▪ Immunisation Programmes ▪ Screening Programmes ▪ Work led by the Public Health Directorate to support provision of high quality, efficient health and social care services, such as Needs Assessments. <p>f. Scrutinise significant strategic change programmes in order to ensure there is an adequate focus on achieving a positive impact on health and wellbeing, and a positive impact (where possible) on health inequalities.</p> <p>g. Review and constructively challenge the assurances that have been provided, as to whether their scope meets the needs of the population of the Western Isles and that community involvement and engagement actively informs planning and delivery of public health action.</p> <p>h. Commission further assurance work for areas that are not being subjected to sufficient review.</p> <p>i. Seek assurance that action is being taken to address key issues relating to Public Health.</p> <p>j. Escalate, where necessary, key public health issues to the NHS Board for consideration of raising in other relevant partners/agencies.</p>
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	<ul style="list-style-type: none">k. The Committee will produce an annual report incorporating a statement of assurance for submission to the Board via the Audit and Risk Committee.l. Engage with the Community Planning Partnership about whole systems approaches and regional planning and key Public Health issues.
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