**Terms of Reference**

**Prevention Group**

**Created October 2021**

**Amended 1/9/22**

1. **Purpose**

The primary aim of the Prevention Group is to reduce health inequalities and promote health and wellbeing in the local population. The Prevention Group will develop the strategic approach to the prevention of ill health and the promotion of wellbeing within the Trust and have oversight of implementation of supporting action plans that proactively create the local agenda and that contribute to the ICS agenda, which includes, but is not limited to:

• Treating tobacco addiction as part of a whole NHS smoke-free model

• Reducing alcohol related harm

• Healthier Weight and Treating Obesity

• Public Health Prevention in Maternity

• Population Health Management

1. **Membership**

Care group director

Head of women’s health, outpatients & place-based care: Chair

Public health consultant +- public health registrar

Public health representation from partners

Clinical lead

MECC coordinator

Falls lead

Urgent & Emergency Care Operational Manager

Head of midwifery

Active Hospitals/ Physical activity lead

Smoke free NHS Strategic Manager

Physiotherapy Pain Lead

Project manager

Digital lead

Communications and marketing

Information management

Business intelligence

1. **Objectives**

The objectives of the Group are to provide co-ordinated and cohesive strategic leadership in relation to ill health prevention and health promotion within the Trust and work directly with wider stakeholders to develop strategies and action plans in the context of a ‘whole systems’ approach. The work will align with the priorities of the Trust, Integrated Care System wider system and will focus on:

* **Physical activity**- reducing inactivity and promoting the benefits of movement
* **Healthy weight**- supporting people in achieving a healthier weight and treating obesity
* **Alcohol**- reducing alcohol harms and supporting recovery
* **Tobacco**- reducing tobacco harms by promoting a Smokefree NHS and providing treatment for tobacco dependence
* **Substance use**- reducing harms from substance use and supporting recovery
* **Best Start in Life**- ensuring all babies born at the Trust have the best chance of growing up healthy
* **Lifestyle behaviour change**- empowering people to address the wider determinants of their health
* **Data** – ensure that we can evaluate success and failure and learn and adapt to change
* **MECC** – Embed MECC as the default approach to health promoting conversations and behaviour change
1. **Processes**

The processes by which the Group will operate are as follows. The Group will:

* Report to the Health Inequalities Group
* Raise key issues with relevant groups to facilitate a collaborative approach to the delivery of outcomes
* Oversee the work of the necessary Task & Finish Groups such as are required to support the delivery of action plans.
* Endorse and oversee the achievement of any relevant national and local targets/actions.
* Ensure MECC is a golden thread throughout different projects
* Be a source of information sharing to promote best practice
* Delegate actions to stakeholders within the system
* Communicate and connect with providers and other stakeholders on the development and delivery of the strategic approach and action plans
* Be a central point of access for training and programmes of work that support population health, before further dissemination to the wider organisaton
* Ensure that subgroups are able to capture data in a format that can be extracted and analysed, to provide evidence of cause and effect. This data will form part of local evaluation as well as contributing to the wider evidence base.
* Prepare staff to be part of a health promoting culture
1. **Frequency of Meetings**

Meetings will be held monthly. In exceptional circumstances, a meeting may be cancelled or re-arranged.

1. **Minutes and Agenda**

Agenda and minutes will be coordinated between the Chair and designated support. Agenda will be circulated no less than seven days prior to the meeting, as will any material relevant to the agenda.

Minutes will be circulated to all group members within five working days of the meeting and minutes remain confidential whilst ‘draft’ and until agreed.

1. **Quorum**

The quorum for the meetings is the chair or delegated deputy and four other group members.

1. **Review**

The Group will review these Terms of Reference annually and/or update as required.