Oral Health Promotion Partnership Board
Terms of Reference

1 Purpose of the Board

The aim of the Board is to facilitate multi-agency partnership working in order to deliver improvements in oral health and reductions in oral health inequalities for the population of Leicester, Leicestershire and Rutland with an initial focus on pre-school children before moving to other age groups.

The Board will focus on the mobilisation and implementation of the Oral Health Promotion Strategy 2014 – 2017 for Leicester City, Leicestershire and Rutland County Councils will have the opportunity to participate (with appropriate funding) on any of the initiatives planned by the Board on a case by case basis.

The Board represents a multi-agency partnership with key stakeholders supporting the delivery of oral health improvement across Leicester, Leicestershire and Rutland.

Partners will:
- Share expert knowledge, best practice, skills and experiences
- Provide leadership where appropriate
- Disseminate information to their respective organisations
- Ensure appropriate communication arrangements are in place
- Co-ordinate action locally
- Encourage innovation and evidence based approaches for oral health improvement

2 Remit of the Board

- Develop, agree and endorse Multi-Partnership Oral Health Promotion Strategies for differing population groups as defined by the Board, commencing with a focus on 0-5 years at the outset
- Identify systems and areas which require further consideration
- Facilitate opportunities to work with other disciplines, agencies and topic areas to build capacity for oral health improvement
- Share knowledge to ensure effective delivery of oral health improvement programmes
- Define task and finish groups
- Receive and consider reports from stakeholders

3 Management of the Board

- The Board will be jointly led by the Consultants in Public Health with leadership responsibilities for oral health in Leicester City and Leicestershire and Rutland Counties.
- The meetings will be Chaired by the Consultant in Public Health with leadership responsibilities for oral health in Leicester City.
- Any decision affecting Leicestershire & Rutland County Councils cannot be made without the Consultant in Public Health with leadership responsibilities for oral health in that area being present.
- The Chair of the Local Dental Network will provide support to both Consultants in Public Health as Vice-Chair to the Board.
• Meetings will be held on a quarterly basis, agenda and corresponding papers will be circulated by the Chair a week in advance of meetings.
• All members should confirm attendance prior to the meeting.
• Full members who are unable to attend may nominate a deputy.
• The Board’s management and administrative support will be provided by Leicester City Council’s Public Health Directorate. Draft minutes will be circulated to both Consultants in Public Health for approval before distribution to Board members.

4 Accountability of the Board

Leicester City:
The Board will report directly into Leicester City’s Children’s Trust Board. Regular updates and briefings will also be held with the Deputy City Mayor (Lead Member for health and Chair of the Health and Wellbeing Board) and the Assistant City Mayor (Lead Member for children, young people and schools and member of the health and Wellbeing Board).

Leicestershire County and Rutland:
Partnership governance arrangement for the County and Rutland are currently under review. Until this is complete the Consultant in Public Health will report to the Public Health Directorate Senior Management Team (DMT) and onto CMT (for Leicestershire) and SMT (for Rutland) and via this to the Health and Wellbeing Boards for Leicestershire and for Rutland.

5 Membership of the Board

<table>
<thead>
<tr>
<th>Full members</th>
<th>Leicestershire and Rutland County Councils</th>
<th>Key Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultant in Public Health (Chair)</td>
<td>Consultant in Public Health – Representing Leicestershire &amp; Rutland</td>
<td>Chair of Local Dental Network (Vice Chair)</td>
</tr>
<tr>
<td>Head of Early Prevention: Children and Young People’s Services</td>
<td></td>
<td>NHS England Area Team: Primary Care Commissioning (Dental Services)</td>
</tr>
<tr>
<td>Head of Learning Services: Children and Young People’s Services</td>
<td></td>
<td>NHS England Area Team: Public Health Commissioner (Health Visiting and Family Nurse Partnership)</td>
</tr>
<tr>
<td>Head of Service Transformation: Children &amp; Young Peoples Services</td>
<td></td>
<td>Leicester City CCG: Lead for Children and Young People</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Health Education East Midlands: Workforce Development</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Co-opted members</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Health Project Manager</td>
<td>Public Health Manager</td>
<td>Public Health England: Consultant in Dental Public Health</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Salaried Dental Service: Specialist in Paediatric Dentistry</td>
</tr>
</tbody>
</table>

Additional members will be co-opted as necessary. Further attendees will be invited as and when required.

6 Quorum
The meeting will be quorate when both Consultants in Public Health and three key partners who are full members are present.

7 Conflict of Interest
All members should identify and declare any conflict of interest. It is the responsibility of the Consultants in Public Health to decide between the following actions to manage conflict:
• Continued participation in decision making but abstain from deciding a particular issue
• Abstain from the discussion and decision making on a particular issue
• Delegate function on a temporary basis to another member
• Resign – either before becoming conflicted or once the conflict arises