



**Health & Social Care Partnership
Older People's Consultative Group
Draft Terms of Reference**

1. Introduction:

- 1.1 The Older People's Consultative Group has been re-formed as part of a new set of governance arrangements that reflect the creation of the Health & Social Care Partnership and the Integrated Joint Board.

2. Role & Purpose:

- 2.2.1 It is a primary means for consultation on Health & Social Care service development planning for older people in the region.
- 2.2.2 It can be consulted on issues for older people not directly related to Health & Social Care.
- 2.2.3 It can be consulted on issues not directly relating to older people but to which older people's groups have valuable and valid input.
- 2.2.3 To ascertain, co-ordinate and reflect the views of older people in Dumfries and Galloway who are members of recognised groups either for or who represent older people.

3. Membership

- 3.1 The chair and vice-chair will be an elected member from the local authority and an appointee of the NHS board. They will rotate their role on an annual basis.
- 3.2 Officers supporting the group will come from within the Health & Social Care Partnership. An officer will be identified as a single point of contact for the group.
- 3.3 Appointee's from recognised groups either for or who represent older people. (Appendix 1)
- 3.4 Membership will be reviewed annually.

4. Membership roles

- 4.1 The chair and vice-chair will formulate an agenda for each meeting, manage the meeting, approve draft notes prior to circulation and where requested represent the group on other bodies unless there is a specific request for an OPCG member.
- 4.2 Officers supporting the OPCG will support the chair and vice chair in their roles, instigate consultations and collate any responses conducted outwith meetings, organise venues and catering if required, coordinate invitations to and notes from meeting. One officer will be identified as a single point of contact for the OPCG.
- 4.3 Appointees from recognised groups, or their substitute, will be expected to attend meetings and respond to any other consultations requested of the OPCG outwith the normal meeting cycle that will be done via email wherever possible. Members should liaise with their groups and express fairly the diversity of views and opinions given.
- 4.4 Appointees are there to give the views of those they represent over their own personal view.

5. Reporting Arrangements

- 5.1 The chair will provide an annual report, detailing the work of the group along with any significant achievements to:
The Health & Social Care Senior Management Team.
The IJB Clinical and Care Governance committee.

6. Meetings

- 6.1 The group will meet quarterly.
- 6.2 The chair may, at any time, convene additional meetings of the group.
- 6.3 Eight members (including the Chair or Vice Chair) will represent a quorum.
- 6.4 Appointees are expected to prepare for and to fully participate in the meetings. The chair will ensure all who attend are given the opportunity to speak.
- 6.5 Appointees can on occasions, opt to send an agreed substitute to meetings where they cannot attend.
- 6.6 Papers will be circulated no less than 1 week before each meeting and other papers may be produced and circulated for comment or information as and when required.