# Highland Green Health Partnership Terms of Reference November 2023

# Membership

Organisation	Name	Job Title
NHS Highland	Cathy Steer	Head of Health Improvement
	Dan Jenkins	Health Improvement Specialist
	Ailsa Villegas	Health Improvement Specialist
	Chrissie Lane	MacMillan Consultant Nurse
	Kate Thomson	Health Improvement Specialist - NHS Greenspace
	Helen Perkins	Senior Development Officer - Green Health
Scottish Natural Her- itage (SNH)	Alan MacPherson	Health & Participation Manager
	Cattie Anderson	Area Officer
High Life Highland (HLH)	Lynn Bauremeister	Health & Wellbeing Manager
	Imogen Furlong	Outdoor Activities Manager
University of the Highlands and Islands (UHI)	Trish Gorely	Senior Lecturer, Department of Nursing
	Sarah-Anne Munoz	Senior Lecturer – Division of Rural Health and Well- being
Highland Third Sector Interface (HTSI)	Mhairi Wylie	Chief Officer
	Sophie Isaacson	Communications Officer
	Charlotte Macken- zie	Arts in Nature Manager
	Isobel Mcleish	Think Nature Health Walk Coordinator
The Highland Envir- onment Forum	Caroline Vawdrey	Coordinator
Paths for All	Gill McShea	Walking for Health Development Officer
GP	Dr Katie Walter	General Practitioner (Advisory Role)
Cairngorms National Park Authority (CNPA)	Adam Streeter Smith	Recreation & Access Manager
The Highland Council	Kirsty Ellen	Community Food Growing Coordinator
	Matthew Hilton	Planning
	Katie Patesron	Greenspace and Nature Networks Project Officer
Sustrans/Highland Council	Lizbeth Collie	Senior Project Officer Active Travel

## Positioning

The Highland Green Health Partnership is chaired by NHS Highland and feeds into the Highland Community Planning through the Mental Health Delivery Group of which is is a thematic sub-group.

It is recognised that the Highland Green Health Partnership was initiated as part of Our Natural Health Service, a national programme being led by NatureScot aimed at connecting people with nature for their improved health & wellbeing. While the National Project Board and Operations Group ceased in 2023, the Highland Green Health Partnership continues to work towards the original aims and principles and is part of an informal network across Scotland.

### Purpose

The vision of the Highland Green Health Partnership is :

'By 2030, the natural environment will be valued as essential for the health & wellbeing of the people of Highland. We will work together to support individuals and communities to connect with and enjoy nature, while safeguarding our natural spaces and promoting inclusion'

## The partnership will:

- Focus on tackling health inequalities with a particular focus on mental health.
- Identify geographical areas to target to ensure that there is a focus on vulnerable groups of people such as older people, people with disabilities, people with long term conditions, people who are isolated and lonely and people with mental ill health.
- Agree a communication plan and assist in the development of a network of key individuals and a shared learning environment.
- Coordinate partnership efforts on the use of the outdoor environment by scaling up or adding value to existing activity and establishing new activity in areas where there is little or no provision.
- Establish a monitoring framework and review progress against an agreed work plan.

#### **Role and Responsibility of Partners:**

To undertake this responsibility effectively the partners will:

- Attend all meetings and if necessary nominate a proxy.
- Exercise financial authority to support the project.
- Receive and review progress reports from the Green Health Development Officer.
- Identify roles within the work plan, deliver actions and report back on them.
- Provide guidance, advice and support to the Development Officer.
- Make timely decisions and take action so as to not hold up the project.
- Notifying members of the group, as soon as practical, if any matter arises, which may affect the delivery of the work plan.
- Review risks, issues and exceptions and determine appropriate courses of action.
- Wholeheartedly champion the work of the Partnership within their organisation and beyond.

#### Meetings

There will be quarterly meetings of the Partnership. If required subgroup meetings will be arranged outside of these times at a time convenient to subgroup members.

Decisions will be made by consensus (i.e. members are satisfied with the decision even though it may not be their first choice). If consensus is not possible, a decision will be reached by a majority vote of partners present at that meeting. In the event of a split vote, the Chair will have the casting vote.

Administrative support will continue to be provided as an in-kind contribution through NHS Highland with support from partners on request. Meeting agendas, papers and minutes will be circulated promptly and in good time for consideration by partners.

Summaries of meetings and relevant papers will be made available through the sub-page on the CPP website