

**MINUTES of the meeting of Health and Wellbeing Board held at Council Chamber - Brockington on Tuesday 22 October 2013 at 3.00 pm**

**Present:** Councillor GJ Powell (Chairman)

**Councillors:** Ms J Bremner, Mr S Clee, Coombes, Mr P Deneen, Supt Ivan Powell, Ms E Shassere and Dr A Watts

**1. APOLOGIES FOR ABSENCE**

Apologies were received from Councillor ANH Attwood, Mr R Garnett, Mr B Hanford and Mr D Smith.

**2. NAMED SUBSTITUTES (IF ANY)**

Ms M Pert for Mr B Hanford and Mr A Dawson for Mr D Smith.

**3. DECLARATIONS OF INTEREST**

Mr S Clee declared a non-pecuniary interest in Agenda Item 9: NHS Transfer to Social Care of Reablement Monies.

**4. MINUTES**

**RESOLVED:** That the Minutes of the meeting held on the 9 July 2013 be confirmed as a correct record and signed by the Chairman.

**5. QUESTIONS FROM MEMBERS OF THE PUBLIC**

None.

**6. THE HEALTH AND WELLBEING STRATEGY - MAKING IT REAL**

The Director of Public Health provided a presentation on the Health and Wellbeing Strategy – Making it Real. During her presentation, the following points were highlighted:

- That the Health and Wellbeing Strategy was based on the Framework that had been produced as a result of the Marmot public health review.
- The Board's Priorities which would be
  - Staying Healthy
  - Integrated services and pathways
  - Communities and volunteering
  - Think Family
- Examples under the priority workstreams for the Board included:
  - Staying Healthy - Better use and sharing of data to help inform action to address reducing alcohol harm. The Alcohol Harm Reduction Group was leading this work.

- Integrated services and pathways - reviewing and redesigning child-facing frontline health services as appropriate to achieve better early health outcomes for children and young people.
- The Urgent Care Board would oversee the area of the integrated services, and initiatives included increased flu vaccination for key staff, a seven day a week Clinical Assessment Unit and Social Care support.
- There would be a focus on the reduction of excess winter deaths through greater prevention, self-care, and community services.
- Three areas of focus were proposed under the Think Family priority. The most important was Strengthening Families which would help to provide a new approach to reduce demands and help meet the needs of the 310 families requiring the most input from a number of agencies. There would also be a remodelling and a refinancing of the early help and specialised safeguarding services.

**RESOLVED: That the report be noted**

## **7. WYE VALLEY NHS TRUST FUTURES PROJECT**

The Chief Executive of the Wye Valley NHS Trust presented a report on the Trust's Futures Project. The following issues were highlighted:

- That the Project Oversight Board met in July 2013 and reviewed the draft Outline Business Case (OBC). The Herefordshire Clinical Commissioning Group (HCCG) began work in August on a clinical strategy for the County in parallel to the Business Case, with the support of the Wye Valley Trust Futures project team.
- That the final version of the OBC would be presented to the Health and Wellbeing Board in January 2014. The timescale was dictated by the production of the Clinical Strategy and would allow time for the outputs to be evaluated and the assumptions tested.

**RESOLVED: That the report be noted.**

## **8. HEREFORDSHIRE CLINICAL COMMISSIONING GROUP STRATEGY**

The Board noted a report on the Herefordshire Clinical Commissioning Group Strategy.

**RESOLVED: That the report be noted.**

## **9. NHS TRANSFER TO SOCIAL CARE AND REABLEMENT MONIES**

The Board noted a report that outlined how the local health and social care system was applying NHS funding for social care locally and to confirm that the Joint Strategic Needs Assessment for the local population had been taken into account and that the outcomes reflected shared health and social care objectives. Local monitoring of performance arrangements were in place for 2013/2014 and would be submitted to the NHS England Area Team.

On the 19<sup>th</sup> June 2013 NHS England issued a letter to the Clinical Commissioning Group (CCG) confirming the allocation for 2013/2014, which for Herefordshire is £3,151,863. During 2013/14 the responsibility for transferring this funding from the NHS to Local Authorities lay with NHS England, but the arrangements should be agreed locally with

the CCG and the Local Area Team of NHS England. The transfer would be through a formal Section 256 agreement of the 2006 NHS Act.

The Local Authority and the CCG had considered the proposed priorities, expected outcomes and monitoring arrangements, and formally agreed these within the CCG Service Transformation and Innovation Group (STIG). These arrangements would be submitted to the CCG Board for final approval. The Local Authority and the CCG were starting to develop a set of agreed health and social care integrated commissioning priorities in preparation for the implementation of the Care and Support Bill in 2015 and its focus on integrated care. This process would include discussions and agreement about priorities for funding for 2014/15.

Following a discussion, the Chairman undertook to confirm to Board members that the Clinical Commissioning Group and the Local Authority had reached agreement on the detail supporting one of the schemes.

**RESOLVED:**

**That:**

- a) **The Board confirm to the NHS England Area team that the spending plans and monitoring arrangements in the report meet the conditions set out in Gateway Letter 00186 – funding transfer to social care enabling the transfer to take place from the NHS England Area Team to Herefordshire Council (the Local Authority); and;**
- b) **The Board notes the transfer of reablement funding from the Clinical Commissioning Group (CCG) to the local authority as the NHS element of the Herefordshire reablement investment.**

**10. AUTISM SELF-ASSESSMENT**

The Director of Adult Wellbeing reported that the Minister of State for Care and Support informed Local Authorities of the second national exercise to evaluate progress in implementing the 2010 Adult Autism Strategy Fulfilling and Rewarding Lives. The deadline for submissions to Public Health England had been 30 September 2013 and Herefordshire's response had been submitted on time.

**RESOLVED: That the report be noted**

**11. NESTA BID**

The Grants and Partnerships Officer reported that the application to the Centre for Social Action Innovation Fund had been submitted as an expression of interest. The closing date for submissions was 31 October, but the expression of interest had been submitted prior to this and a decision was awaited on whether or not the submission would be agreed to go forward to full application stage.

**RESOLVED: That the report be noted**

**12. HEALTH AND WELLBEING BOARD FORWARD PLAN**

The Board noted its Forward Plan.

**RESOLVED: That the report be noted**

The meeting ended at 16:45

**CHAIRMAN**