

MINUTES of the meeting of Health and Wellbeing Board held at Council Chamber - Brockington on Tuesday 21 June 2011 at 2.00 pm

Present: Councillor PM Morgan (Chairman)

Dr S Aitken, Ms J Bremner, Mr P Brown, MrCJ Bull and Mrs J Newton

In attendance: None

1. APPOINTMENT OF CHAIRMAN

The Board noted the appointment of Councillor PM Morgan, Cabinet Member – Health and Wellbeing, as Chairman of the Health and Wellbeing Board.

2. APOLOGIES FOR ABSENCE

Apologies were received from J Burton, J Davidson, A Watts and M Woodford.

3. NAMED SUBSTITUTES

It was noted that Dr Aitken was representing J Davidson.

4. DECLARATIONS OF INTEREST

There were none.

5. MINUTES

RESOLVED: That the Minutes of the meeting held on 14 April 2011 be confirmed as a correct record and signed by the Chairman.

6. TERMS OF REFERENCE

The Board was invited to note its terms of reference and to consider whether any changes were required in the light of local and national developments.

An additional report had been circulated setting out an extract from the Government's response to the NHS Future Forum's recommendations. This had been produced following a national listening exercise on the proposals in the Health and Social Care Bill.

The Board noted the proposed changes to the Board's remit and Membership and that a report would be made to Council in due course.

7. OUTCOMES FROM STAKEHOLDER WORKSHOP - 16 JUNE

The Board considered the outcomes from the Stakeholder workshop held on 16 June: Health and Wellbeing in Herefordshire – working together for better outcomes.

A summary of the points raised at the workshop was circulated at the meeting.

The Deputy Chief Executive reported that almost all those who had completed the evaluation forms had considered the event useful or very useful.

Key findings had included the view that whilst, inevitably, the first year of the Board's existence would be developmental there was a strong wish to undertake some tasks and demonstrate tangible progress during 2011. A balance had to be struck between the long term and short term aims.

He highlighted, as an example, the Healthy Hereford Workforce initiative designed to deliver health messages to employees in both the public and private sectors.

The Board noted the outcomes from the Workshop, which would be used to shape the Board's development plan.

8. HEALTH AND WELLBEING DEVELOPMENT PLAN

The Board discussed the development of Health and Wellbeing in Herefordshire and the Board's role in this work.

The Board reviewed the discussion paper on planning for health and wellbeing in Herefordshire, enclosed with the agenda papers at page 19, which had been updated since it had been presented to the Board in April. The brief to the external facilitator to assist in the Board's development was circulated; Inlogov (institute of Local Government Studies) at the University of Birmingham had been appointed.

It was noted that the interim Director of Public Health and the external facilitator would be updating the document and proposing a work programme to the next meeting. The external facilitator had not been able to attend the meeting but would be asked to contact all Board members to seek views on planning the next workshop based meeting in July.

The Chairman drew attention to the 10 key issues that had been suggested for discussion at the workshop as set out at pages 22 and 23 of the agenda papers.

In discussion the following principal points were made:

- That the document would clearly need to be amended to reflect the Government's response to the NHS Future Forum's recommendations. These strengthened the Board's role, in particular in relation to commissioning and broader system management and also proposed increased public and patient involvement.
- The Board's strategy should be underpinned by the Joint Strategic Needs Assessment. It was suggested that the title of the Joint Strategic Needs Assessment needed to be made more user friendly if it was to resonate with the public.
- It was important that the Board developed its role in parallel with and at the same pace as the GP/Clinical Commissioning Group.
- The budget planning cycle was commencing and there might be an opportunity for the Board and Commissioning Group to test how their roles might develop in some areas.
- The draft legislation envisaged that the Board's authority and influence would be derived from the Council. The Board was nevertheless a partnership vehicle through which the Council exercised its functions.

- A report would be made to the Board in the first instance on possible changes to its membership.
- In developing an outline health and wellbeing strategy account would be taken of the views expressed at the recent workshop on health and wellbeing in Herefordshire on the need for some focused actions to be delivered in the short term that made a demonstrable difference.
- Community engagement, section 9 of the discussion paper, had proved problematic in Herefordshire to date and consideration should be given to engaging the public about health and wellbeing priorities at an early stage. The need to change previous approaches, innovate, and seek to involve those who had not to date engaged was acknowledged. This was something that the external facilitator would explore.
- That aspects of section 12 of the discussion paper headed Organisational Development might be broadened to reflect the need to engage with others to deliver the desired outcomes.
- The engagement strategy should be cross-cutting. The possible link to localities and the need to join up the various locality strategies of various organisations in the County was highlighted.
- There was a need to ensure that there was clarity as to how the Board would fulfil its role and translate intentions into health improvement. To date health improvement work had not always delivered the desired improvements. The Board would therefore need to develop different approaches. It was important to assert the Board's role in system management and to work closely with the GP/Clinical Commissioning Group from the outset.

RESOLVED:

That (a) a work programme for the Board be reported to the next meeting;

(b) the discussion paper on planning for health and wellbeing in Herefordshire be updated and reported to the next meeting; and

(c) a report be made to the Board on possible changes to Membership.

9. JOINT STRATEGIC NEEDS ASSESSMENT AND INTEGRATED NEEDS ASSESSMENT PROCESS

The Board considered proposals to change and integrate needs analysis and assessment to support the Board's work and broader partnership priority setting.

The Interim Director of Public Health presented the report. She explained the proposed incremental approach to developing and integrated needs assessment with the intention of delivering a fully integrated "gold standard" Joint Strategic Needs Assessment (JSNA) within three years. A new approach was needed to deliver the outcomes the Board sought.

She emphasised the Board's system leadership role and the need for the Board and the GP/Clinical Commissioning Group to have a clear, shared understanding of needs and priorities and how these could best be met.

It was noted that the JSNA was due to be refreshed in October 2011 with a more fundamental revision planned for June 2012. The key messages in the refreshed

document would be largely unchanged. A report would be made to the Board's next meeting on the JSNA. Emerging issues would be brought to the Board's attention.

It was agreed that it was important to ensure there was input into the commissioning round for 2011/12.

RESOLVED:

- That
- (a) progress and work around the Integrated Needs Assessment be noted;
 - (b) the approach to the development of the Integrated Needs Assessment over the next 12 months as set out in the report be agreed;
 - (c) it be agreed that the Health and Wellbeing Board act as the Project Board for the Joint Strategic Needs Assessment;
 - (d) a report on the Joint Strategic Needs Assessment be made to the next meeting.

10. HEALTH AND WELLBEING IN HEREFORDSHIRE INTRODUCTORY TRAINING

The Board was invited to note the introductory training on health and wellbeing that had been offered and to support the use of a ladder of intervention as the core of the approach to health and wellbeing introductory training.

The training had been designed to enable a better understanding of health and wellbeing and help identify and remove barriers to tackle health improvement issues in Herefordshire. A copy of the slides of a presentation delivering that training and describing the ladder of intervention had been circulated separately with the agenda papers.

RESOLVED: That the use of the ladder of intervention as the core of the approach to health and wellbeing introductory training in Herefordshire be supported.

11. FUTURE MEETINGS

The Board noted the list of scheduled meetings.

The meeting ended at 3.20 pm

CHAIRMAN