

MINUTES of the meeting of Health and Wellbeing Board held at Committee Room 1, Shire Hall, Hereford on Wednesday 25 March 2015 at 1.30 pm

Present: Councillor GJ Powell (Chairman)
Councillor Mrs D Jones MBE (Vice Chairman)

Councillors: JW Millar, Ms H Coombes, Mr P Deneen, Dr Andy Watts and Ms J Bremner

113. APOLOGIES FOR ABSENCE

Apologies for absence were received from Jo Davidson and Jo Whitehead.

114. NAMED SUBSTITUTES (IF ANY)

None.

115. DECLARATIONS OF INTEREST

None.

116. MINUTES

The Minutes of the meeting of the 28 January 2015 were signed and approved as a correct record.

117. QUESTIONS FROM MEMBERS OF THE PUBLIC

None.

118. HEALTH AND WELLBEING STRATEGY

The Board received a progress report on the Health & Wellbeing Strategy. It was noted that the Key Themes for the strategy were in place, and that the priorities had been identified.

Feedback from two consultation exercises with carers and local communities were tabled at the meeting. The first of these had resulted from a systematic scatter gun approach to the question of how people stayed healthy and looked after their wellbeing. A high degree of independence was shown within the County by the answers that had been received, and people were not making use of existing services but rather turning to their communities and peer groups for support. The prevention agenda was also supported by the retired population of the County, who were content to support themselves. An action plan would be drawn up to address priority areas.

That there was a great deal of community development good practice in the County, and not all of it had been captured within the consultation. It could, however, be showcased in an annual event.

The Director of Adult Wellbeing pointed out that much of the community development work outlined was undertaken by members of the Community Development Forum (CDF), and it was suggested that representatives should be invited to future meetings in order to ensure

that there were appropriate reporting mechanisms between the HWBB and community development within Herefordshire links in place with the CDF.

It was agreed after a brief discussion that clarity was needed about the communication of the strategy and that a HWBB strategy communications plan needed to be developed

A proposal had been submitted to the National Systems Leadership Programme, run by the Leadership Centre. The Centre was working with NHS England and the NHS Local Development Partners to support existing locality projects. Criteria are based on working with local partners, gaining support from H&WB Partners, service user groups, the voluntary sector, providers and commissioners. The bid was based on the self help element at grassroots community level which will enhance the successful proposal for work with primary care in localities.

Resolved:

That

- a) the approach being taken and the priorities outlined be approved;**
- b) feedback from the consultation be noted;**
- c) Board members identify their role in championing and communicating the health and wellbeing strategy and action plans; and;**
- d) The Board approve the submission of a proposal to the Leadership Centre's National Systems Leadership Programme.**

119. HEREFORDSHIRE CLINICAL COMMISSIONING GROUP OPERATIONAL PLANS 2015/16

The Board noted the Herefordshire Clinical Commissioning Group's (HCCG) Operational Plans 2015/16. The following issues were raised:

The HCCG would have a focus on the achievement of NHS Constitutional targets and ensuring the delivery of high quality care. It would concentrate on three priorities:

- Delivering greater integration of care
- Enhancing supportive self-management of long term conditions
- Strengthening Herefordshire's urgent care system including re-procurement of services and improved system management

That there would be a greater emphasis on children in the commissioning plans.

The Chairman asked that the plans be RAG rated, and suggested that the HCCG would be hard pressed to deliver against the target by 2020. He went on to say that the Transformational Board should be integral to these plans, but no reports had been forthcoming from that Board for several months.

The Clinical Lead of the HCCG said that a joint governance structure had been set up which would meet soon. The Transformation Board had been helpful in setting up programmes, but progress had been slow in what was an extremely sensitive area. All the system leaders had accountability for healthcare within Herefordshire, and had responsibility too and were performance managed by, different systems.

The financial plan 15/16 for the HCCG did not yet present a balanced budget, and officers were not yet able to close the existing gap. No report had been put to this

meeting because of the extreme sensitivity of the situation, and trust had to be developed between partners on both sides. The assurance processes were different for the system leaders which meant that care did need to be taken.

The Director of Adults Wellbeing said that, from a governance perspective, it was important for the Board to understand that it was unlikely that the HCCG budget would be balanced for 2015/16 and that NHS England would have a view on the HCCG's decision to submit a plan that was not financial sustainable. The Board would need to understand what the implications of submitting a financially unsustainable budget were and these were not articulated in the report. Whilst every Clinical Commissioning Group in the Country was facing difficult financial situations, it was important that the Board was properly briefed on the issues facing the local health economy, particularly in view of any subsequent decisions by NHS England on how to support the local health economy.

Resolved:

That:

- (a) The Board note the content of the HCCGs 2015/16 operational plan;**
- (b) Amendments to the briefing note be made that set out clearly the financial position for the Board once the financial position had been confirmed and circulated to all Health and Wellbeing Board members; and;**
- (c) The Board endorse the plan and the HCCGs work programme.**

120. COMMISSIONING INTENTIONS 2015/16

The Board noted a report on the commissioning intentions and programmes that promoted the health and wellbeing of the population of Herefordshire. The following points were made:

- That whilst the list was ambitious, none of the items in the list were not already being worked on, and all were reflected in the Health and Wellbeing Strategy.
- That there were six themes that were being worked on within the Children and Young Peoples Plan, which was linked to the Children and Young People Partnership. The overall Plan, together with the associated implementation plan, would focus on the how shrinking resources could be best utilised for the service.
- All items listed in the document were covered by approved budgets for the coming year.

Resolved:

That:

- (a) The Board noted the broad and specific commissioning intentions.**
- (b) areas of commonality and synergy to support increasing opportunities for co-commissioning be noted; and;**
- (c) The development of capability to support commissioning intentions that are evidenced based and demonstrate better outcomes for people be noted.**

121. PUBLIC HEALTH ANNUAL REPORT

The Public Health Annual Report was noted. The following points were made:

- That the focus of this year's report was on children
- That improvements had been made to the take up of immunisations in the County
- That there was a recognition of the issues concerning dental health, that these had been around for a while and, importantly, what steps needed to be taken to resolve the matter.
- That responsibility for dental care lay with the local authority, and with 97% of 3 to 4 year olds now in nursery, this was a good place to start promulgating a dental health message. Group cleaning exercises after lunch were being worked on as one way forward.
- That there was no mention of prevention awareness issues in high Schools within the report, as it was focussed on a younger age group. The School Nurse service was being recommissioned and would include more prevention work.
- That the pathway for health visiting was being recommissioned in association with the HCCG, and whilst this had yet to be finalised, it was a high priority.
- That breastfeeding was an area that was not currently performing well and, as it was an overlap of responsibility between the HCCG and the Council, was an opportunity for joint working.
- As the Care Act would be coming into force in April, this would be a good time to undertake a refresh of the needs of carers and young carers.

Resolved: That the report be noted.

122. ASSESSING READINESS FOR IMPLEMENTATION OF BETTER CARE FUND PLANS IN 2015-2016

The Board receive an update in relation to the expectation that local health and social care communities will complete a national template to assess their readiness to implement the Better Care Fund.

Resolved:

That:

- (a) The Board approved the assessment completed by officers from Herefordshire Council and Herefordshire Clinical Commissioning Group;**
- (b) The assessment be set within the context of the agreed Section 75 Partnership Agreement and the governance arrangements operating allied to the Better Care Fund Plan; and;**
- (c) a briefing note be issued once the process had been completed**

123. MENTAL HEALTH NEEDS ASSESSMENT REPORT

The Board noted the mental health needs assessment undertaken by the HCCG between May 2014 and January 2015 for the purpose of understanding the needs of the population and to provide an evidence base for future commissioning. It integrates service mapping, a review of published evidence, an analysis of population and service data and engagement of the public and other stakeholders. The presentation of the info in one document would prove to be useful for all agencies within the County.

Resolved:

THAT:

- (a) The Board note that the development of the report has involved over 450 hours of engagement with the public including service-users, carers, local groups, front line staff and other key stakeholders;**
- (b) the Mental Health Needs Assessment be utilised in the forthcoming Health and Well-being Strategy and the refresh of the Joint Strategic Needs Assessment; and**
- (c) The Board approved that the report be published by the HCCG**

124. AUTISM SELF-ASSESSMENT 2014

The Board noted a report on the progress made by the Council on the self-assessment for the implementation of the 2010 Adult Autism Strategy "Fulfilling and Rewarding Lives", which had been submitted to Public Health England.

The following points were raised:

- That the action plan was being updated and improved, and that a diagrammatic pathway was to be developed.
- The Autism Partnership Board was in place, attended regularly by the HCCG and other partners, together with an autism strategy.
- A key area of weakness was that of the collection of data and the Council would need to be more forward thinking in this area. More work was also needed on policies associated with autism. There had been a wide consultation on the self-assessment statement.

The Clinical Lead HCCG, said that the information was useful as it highlighted the gaps in service provision. A medical model for autism was not required, and other professionals could be involved in the diagnosis.

The Chairman of Healthwatch Herefordshire said that NHS England had highlighted that there was a lack of awareness of the condition amongst GPs, and many were unclear as to ways of supporting patients. This was an important issue, as GPs were gatekeepers for the available services. He went on to suggest that the report should be used as a benchmark for the coming year to provide greater clarity of progress.

Resolved: That the report be noted.

125. JOINT HEALTH AND SOCIAL CARE LEARNING DISABILITY SELF-ASSESSMENT FRAMEWORK 2014

The Board received a report on the submission to Public Health England of the self-assessment in response to the Joint Health and Social Care Learning Disability Self-Assessment Framework 2014. The following points were made:

- That there would be greater scrutiny of learning disabilities in the future following guidance around access to health services and health inequalities that had been highlighted nationally.
- Herefordshire was lagging behind in this area and progress had been slow. The prevalence of learning disabilities within the County was higher than would have been expected.
- A Learning disability commissioning plan would be submitted to the Board following the General Election in May.
- That the key was to develop an action plan as part of the Learning Disability strategy in order to improve the strategy forward. Data was weak in this area, and a greater focus was being placed on recording it to be utilised to help service users
- The Partnership Board had been revitalised, and there were strong links with the service in Worcestershire

Resolved:

That:

- a) The report be noted; and;**
- b) An interim report be provided to a meeting of the Board in six months time.**

126. MENTAL HEALTH CRISIS CONCORDAT

The Board received a report on the progress made regarding the development of a local Action Plan as part of the Government guidance document 'Mental Health Crisis Care Concordat, Improving outcomes for people experiencing mental health crisis care' (February 2014).

Resolved: That the report be noted

127. ITEMS FOR INFORMATION

The Board noted briefing reports for information.

It was also noted that the Leader of the Council had received a letter from the Department of Health stating that the Special Intervention measures for Children's Services had been lifted.

128. WORK PROGRAMME

The Committee noted its Work Programme.

The meeting ended at 4pm

CHAIRMAN