



<u>Committee and Date</u>
Shadow Health & Wellbeing Board
18 January 2012

<u>Item No</u>
<b>3</b>
Public

**MINUTES OF THE SHADOW HEALTH AND WELLBEING BOARD MEETING HELD ON FRIDAY 9 DECEMBER 2011 AT 9.00AM**

9.00 a.m. – 10.25 a.m.

**Responsible Officer** Jane Palmer  
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**Present**

Councillor S Charmley	Portfolio Holder for Health and Wellbeing, Shropshire Council [in the Chair]
Dr W Gowans	Shropshire County PCT
Dr Caron Morton	Chairman of GP Consortium Transition Board
Councillor C Motley	Portfolio Holder for Flourishing Shropshire Communities, Shropshire Council
Councillor C Wilde	Deputy Portfolio Holder for Health and Wellbeing, Shropshire Council

Officers

Ms F Beck	Director of Integrated Care, Shropshire County PCT
Mrs V Beint	Corporate Director, Health & Care, Shropshire Council
Mrs J Chambers	Chief Executive, Community Health NHS Trust
Dr J Davies	Director of Joint Commissioning, Shropshire County PCT
Mrs J Graham	Group Manager, Care and Wellbeing, Shropshire Council
Dr L Griffin	Managing Director, Shropshire County PCT
Miss E Sandbach	Senior Public Health Analyst, Shropshire County PCT
Mr D Taylor	Corporate Director, People, Shropshire Council
Prof R Thomson	Director of Public Health

**40. APOLOGIES**

Apologies were received from Councillors K Barrow and A Hartley and Dr H Herritty.

**41. DECLARATIONS OF INTEREST**

No declarations of interest were received.

**42. MINUTES**

**RESOLVED:**

That the Minutes of the Shadow Health and Wellbeing Board meeting held on 12 October 2011 be approved and signed by the Chairman as a correct record.

#### **43. JOINT STRATEGIC NEEDS ASSESSMENT [JSNA] PROGRESS AND PRIORITIES**

The Senior Public Health Analyst updated the Shadow Board on the progress made on the JSNA. She outlined the structure that had been developed using the Marmot Review as its base. The Shadow Board noted that the Regional Director of Public Health had made an assurance visit and a local Steering Group had also considered the outline.

She stated that data and information available on the website was being updated and was progressing well. It was noted that work done between teams identified both areas of priority and poor performance and should assist in future work planning. She concluded that the process to date was positive with a good reporting process and a pleasing structure. The Corporate Director of Health and Care commented that the JSNA provided evidence to shape future priorities.

#### **RESOLVED:**

That an initial draft of the priorities, emerging priorities and areas where the Shadow Board considered it could make the most difference to the health of people in Shropshire be reported to the next meeting of the Shadow Board on 18 January 2012.

#### **44. COMMUNITY HEALTH TRUST UPDATE**

The Chief Executive of the Shropshire Community Health NHS Trust gave a presentation on the establishment of the new Community Trust from 1 July 2011, its services, objectives and how it would work to transform local services in the local health and care system. She drew attention to stakeholder events and the ongoing dialogue with stakeholders that illustrated the outward facing nature of the new Trust.

In answer to a query from the Portfolio Holder for Rural Affairs, the Chief Executive agreed that the provision of services to the vast rural area represented a fundamental challenge to the Trust with provision having to be balanced against cost. She stated that the Trust was keen to maximise the services it could offer to the wide, rural community and would endeavour to strive to achieve the correct balance. The Director of Public Health commented on the value of telecare services in minimising travel where possible and promoting access to services.

The Corporate Director of Health and Care stated that the Shadow Board's meeting on 18 January 2012 would bring all priorities together in a sensible format to move forward on the optimum integration of services. Members recognised that there would be no single solution to the nature of the integrated services to be provided but rather a variety of prioritised solutions brought together in a sensible format.

#### **RESOLVED:**

That the update information on the Community Health Trust be noted.

#### **45. HEALTH AND PUBLIC HEALTH TRANSITION**

The Director of Public Health updated the Shadow Board on the transition arrangements for Shropshire Public Health that needed to be in place to enable shadow arrangements to be operational from 1 April 2012. Information was tabled that illustrated the progress of local plans against the national indicative timeline for the transition of PCT public health commissioning provided by the Public Health HR Concordat.

The Shadow Board noted that Shropshire was in a good position to work to the timeline and remain within the cost envelope of £25 per head of population. National, regional and cluster level guidance would support the transition of public health responsibilities to local government and it was noted that, this, together with financial allocations would help in the development of the Transition Plan and may impact on the timelines.

#### **46. PUBLIC HEALTH ANNUAL REPORT**

The Director of Public Health reported that the Public Health Annual Report would be available by the end of January 2012 and would be produced in the same well-received, user-friendly format of the previous year's report.

#### **47. CHILD AND ADOLESCENT MENTAL HEALTH SERVICES [CAMHS] REVIEW**

The Director of Integrated Care, Shropshire County PCT, updated the Shadow Board on the progress of the review and explained that it was recognised that a clear understanding of the service provided was a fundamental part of the process.

Members noted that a wide range of service users had been interviewed as part of the review process and it had been recognised that there was a need to develop a robust commissioning framework. The many recommendations developed included the establishment of a Commissioning Group and the re-establishment of a partnership of all interested parties to agree an Action Plan to take forward these recommendations.

The Chairman of the GP Consortium Transition Board commented on the need to develop the work on preventative care particularly with children and young people. The Director of Public Health added that the consultant who had been involved with the review provided excellent social care and social health support and had been an advisor on the very public case of Baby P.

#### **RESOLVED:**

That a summary of the CAMHS review, together with the associated Action Plan, be reported to a future meeting of the Shadow Board.

#### **48. ANY QUALIFIED PROVIDER**

The Director of Joint Commissioning, Shropshire County PCT reported that the two services that both patients and the public generally wished to see improved were diagnostics and podiatry. It was noted that a Focus Group would be meeting in January 2012 in order to agree priorities for a further year.

#### **49. NHS WINTER PLANNING**

The Managing Director, Shropshire County PCT, stated that a Winter Plan had to be produced each year and drew specific attention to the 'Winter Nine' that related to a nine week period from 5 December to early February 2012 when services may need to be flexible in order to meet need.

The Director of Integrated Care, Shropshire County PCT, reported improvements from the previous year relating in particular to the Urgent Care Strategy and through improved working with partners, a better use of beds available and reduced length of hospital stays. The Shadow Board noted the need to ensure flexibility of services at all times of the year and not just during the Winter months with a resultant reduced need for Escalation Plans.

#### **50. AGEING WELL PROGRAMME**

The Corporate Director of Health and Care presented the report on the Board's engagement with the Local Government Group's Ageing Well Programme, provided an update on progress against the Project Plan, identified a number of areas for further consideration and suggested a meeting of appropriate personnel in January 2012 to take this work forward. Members fully supported the Programme and commented that improved support to people in their own homes and communities represented a golden thread through health care generally.

The Director of Public Health added that a small proportion of the elderly population became vulnerable but a large number gave a high level of support to their local communities in the form of help to community groups, hospital drivers etc., the overall volunteer spirit was excellent and highly commendable, a real asset to the local population. The Corporate Director of Health and Care agreed that active, healthy people had a better quality of life, gave more to their communities and helped to reduce costs. The Portfolio Holder for Flourishing Shropshire Communities commented that the report painted a positive picture that illustrated excellent community cohesion in the county.

The Group Manager, Care and Wellbeing, reported that a bid had been made by the Council for funding from the Department of Health's 'Warm Homes Healthy People' initiative that encouraged a practical approach to helping the community; it was hoped that the bid would be successful.

**RESOLVED:**

- i) That the report be noted and the Shadow Board's positive support be fed back to the Local Government Group Associate on the Ageing Well project as a whole; and
- ii) That up to three Board members be nominated to represent the Shadow Health and Wellbeing Board at the meeting in early January (Part 3 of the project) to consider how best to embed the findings from Parts 1 and 2 into the ongoing work of the Board.

**51. DEVELOPMENT PROGRAMME FOR HEALTH AND WELLBEING BOARD**

The Corporate Director of Health and Care outlined the potential development needs of the Health and Wellbeing Board and the need for a development programme. The Shadow Board recognised the need for the development of a programme and for a focus on shared outcomes that would be delivered by partners working together.

**RESOLVED:**

That the Corporate Director of Health & Care, Director of Public Health and the Acting Chief Operating Officer of the Clinical Commissioning Group [CCG] be asked to commission a development programme to support the leadership of the Board.

**52. OPERATING FRAMEWORK FOR THE NHS IN ENGLAND 2012/13**

The Shadow Board considered the Department of Health's document entitled, 'The Operating Framework for the NHS in England 2012/13' and understood that the key areas of work for the NHS equated to the quality of services provided, the delivery of services and performance to identified standards. Patient focus was recognised as a key theme, 'nothing about me without me'.

It was noted that the financial context would be testing for both providers and commissioners of services in the future. Members noted the focus on dementia and carers' support together with the continuing need for health and social care to work together. The Government's clarity on outcomes and patient experience was an integral thread through the document.

**RESOLVED:**

That the content of the Department of Health's document entitled, 'The Operating Framework for the NHS in England 2012/13', be noted.

**53. DATES OF FUTURE MEETINGS**

**RESOLVED:**

- i) That an additional meeting of the Shadow Health & Wellbeing Board be held on 18 January 2012;
- ii) That future meetings be held at 2.00pm on 15 February and 11 April 2012.

Chairman.....

Date.....