

Committee and Date

Health and Wellbeing Board

6 June 2014

MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 25 APRIL 2014 9.30 - 10.35 AM

Responsible Officer: Karen Nixon Email: karen.nixon@shropshire.gov.uk Tel: 01743 252724

Present

Councillor Karen Calder (Chairman)

Councillors Ann Hartley, Lee Chapman, Professor Rod Thomson, Karen Bradshaw, Dr Caron Morton (Vice Chairman), Dr Helen Herritty, Jane Randall-Smith, Jackie Jeffrey, Ros Francke (Substitute) (substitute for Graham Urwin) and Ruth Houghton (substitute for Stephen Chandler)

1 Apologies for Absence and Substitutes

- 1.1 Apologies for absence were received from Paul Tulley, Shropshire CCG; Dr Bill Gowans, Shropshire CCG; Graham Urwin, NHS England and Stephen Chandler, Director of Adult Services.
- 1.2 Substitutions were notified as follows: Ruth Houghton for Stephen Chandler and Ros Francke for Graham Urwin.

2 Minutes

2.1 **RESOLVED:** That the minutes of the meetings held on 21 March and 28 March 2014 be approved and signed as a correct record by the Chairman.

3 **Public Question Time**

3.1 The Chairman welcomed Mr Peter Gillard, Ludlow resident to the meeting and thanked him and Ms Gill George, Ludlow resident (who was unable to attend that morning), for submitting their public questions to the Board (copy of each question and the relevant response is attached to the signed minutes).

3.2 <u>Question1</u>

By way of a supplementary question, Mr Gillard commented that in going forward into 2015/16 there was talk of a further £30b shortfall nationally. He asked if further reductions such as this could be dealt with in Shropshire without it affecting the quality of services.

In response, officers confirmed that they were already looking ahead to the next 5/6 years and that changes to service delivery in order to better manage budgets and predicted shortfalls would keep quality at the forefront. The shortfall was predicted on how we currently deliver services and the current design work in the health economy was currently being undertaken to ensure that we can manage delivery and budgets in the future. The Accountable Officer noted that the current prediction has risen from £20b to £30b, but was not a sum (it was not £20b + £30b = £50b).

Efforts were being made to make Shropshire health services financially stable for the future and it was confirmed that patient care should not be neglected in the pursuit of funding targets.

3.2 Question 2

By way of a supplementary question, Mr Gillard asked if Shropshire Council supported the retention of the single Accident and Emergency Unit in Shrewsbury, whilst citing the open support by Telford and Wrekin Council for this to be located in Telford.

The Chair commented that she would rather the consultation and decision around hospital reconfiguration be clinically rather than politically led. The Accountable Officer for Shropshire CCG reminded that it was important not just to retain a single A&E unit in Shropshire, but also it's trauma status; there was still more work to be done.

3.3 Question 3

At the outset it was also clarified that the role of the Health and Wellbeing Board was not scrutiny; this function was dealt with by the 'Health and Overview Scrutiny Committee' which was quite separate from the H&WB and was chaired by Cllr Gerald Dakin.

By way of supplementary question, Mr Gillard asked the following on behalf of Ms Gill George who was unable to attend the meeting; complaints continue to be received about orthopaedics services and an assurance was sought that this was being looked at. The Accountable Officer for Shropshire CCG confirmed that this was currently being worked on. There were a lot of contributory factors, not always financial but linked in to workforce development and the retention of skilled staff. Timeliness of appointments was improving and it was hoped that everything would be on target by mid 2014.

4 Disclosable Pecuniary Interests

4.1 There were none.

5 JSNA - Health of the Population Update: EVIDENCE

5.1 Emma Sandbach, Public Health Specialist (Intelligence), gave a verbal presentation on Child Health Profiles for Shropshire for March 2014 and comparing outcomes to previous data in 2013 and also comparing this to the West Midlands and England averages.

- 5.2 Detailed data could be found via this link which was circulated to members after the meeting; http://www.chimat.org.uk/resource/view.aspx?RID=101746®ION=101632
- 5.3 There were some marginal successes and some decreases. Overall it looked as if Shropshire was doing better; though there was a word of warning not to become complacent about progress.
- 5.4 The data was generally welcomed as useful, whilst it was highlighted that this sat alongside other feedback from elsewhere such as schools and the youth service and also how it actually felt on the ground.
- 5.5 **RESOLVED:** That the information be welcomed, the approach be maintained and that our approach should not become complacent.

6 Better Care Fund and Final 256 Agreement: QUALITY & PERFORMANCE

- 6.1 A second performance update on the activity and monitoring of S.256 funding transferred from Shropshire CCG to Shropshire Council was given by Ruth Houghton, Head of Social Care, Efficiency and Improvement.
- 6.2 It was highlighted that Appendix A was data as far as we had; validation was still outstanding, but this was the best estimate at the time. With regard to carer's information at Appendix B, it was suggested that it would be good to triangulate this information with NHS England and Primary Care (contact Graham Whiting, Primary Care Lead, to help facilitate data transfer). This was welcomed.

6.3 **RESOLVED**

- a) That the activity to date against each of the expenditure allocations be noted.
- b) That the annual performance activity against the suite of Local Authority performance indicators (both national and local indicators) be reported to the board in the autumn of each year, once validated and published by the information centre.
- c) That the Health and Wellbeing Board prioritises areas for in depth review as part of the forward plan to include preventive services and locality commissioning.
- d) That carers data be triangulated between Shropshire Council, Primary Care and NHS England.

7 Future Fit Update: QUALITY & PERFORMANCE

- 7.1 A verbal update on Future Fit was given by Dr Caron Morton, from the Shropshire Clinical Commissioning Group. She briefly outlined that extensive engagement would be taking place over the next four months to a year. Work streams will link in to this and underpinning modelling was also being undertaken.
- 7.2 Significant work on communicating the outcome of this to the public was crucial and it was anticipated that Future Fit will present options to the public sometime in 2015.

8 Equalities Charter: FOR DECISION

- 8.1 An amended Equalities Charter was considered for approval by the Health and Wellbeing Board and attached at Appendix A.
- 8.2 **RESOLVED:** That the Health and Wellbeing Board adopts the Equalities Charter at Appendix A and endorses it for ratification across the Health Economy.

9 Physical Inactivity: FOR INFORMATION/DISCUSSION

- 9.1 A link to an all-party commission document on physical activity called 'Tackling Physical Inactivity A Coordinated Approach', was generally discussed by the Health and Well Being Board.
- 9.2 The document highlighted 5 vital areas for action;
 - A national plan of action
 - Getting the message out
 - Design physical Activity back into our everyday lives
 - Making physical activity a lifelong habit
 - Proving success
- 9.3 The Board welcomed the document and agreed that it provided a useful template for the development of a local strategy. As a county Shropshire was rich in green space, but needed more activity areas and to encourage people to be more active more often. Kevin Lewis stated that the most serious risk factor was physical inactivity it had significant consequences on both our health and the economy.
- 9.4 It was agreed that next year (2015) it would be good for the Health and Wellbeing Board to focus on this issue, as they had done with Dementia this year.
- 9.5 It was also agreed that a strategic view needed to be taken first about what was actually happening in Shropshire now and then to work on plugging the gaps in the future. It was agreed that a report would be made to a future meeting in due course.

Signed (Chairman)

Date: