

## Health and Wellbeing Board 6<sup>th</sup> June 2014

### Health and Wellbeing Delivery Group Report to the Health and Wellbeing Board

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#### 1. Summary

1.1 Where appropriate the Health and Wellbeing Delivery Group implements decisions, actions and the HWB Strategy and the Better Care Fund as required by the Health and Wellbeing Board. This report aims to highlight issues raised at the Delivery either for information, endorsement or decision.

#### 1.2 For Information:

- 1.2.1 **HWB Prevention Group** – As discussed at the Health and Wellbeing Development Session in April the HWBB would like to ensure that prevention is captured appropriately across HWB work streams and across our partner organisations.
- 1.2.2 A Prevention Group has formed that will report to the HWBB through Service Transformation Group of the Better Care Fund.
- 1.2.3 The membership of this group and draft terms of reference will be discussed and agreed at a meeting on 2<sup>nd</sup> June. It is proposed that members will include Shropshire CCG, Shropshire Council, provider organisations, voluntary and community sector, Healthwatch and community member(s).
- 1.2.4 **Purpose** (from the ToR) - As one of the four key themes of the Better Care Fund (BCF), the purpose of the Health & Wellbeing Board Prevention Group is to lead on creating a collective understanding of prevention in Shropshire and how prevention will work to improve health and reduce inequalities. This group will ensure that prevention ethos and activity is embedded within the Better Care Fund and all of the Health and Wellbeing Board's work programmes; and will ensure the delivery of the prevention strand of the BCF. It will also provide the framework and opportunity for prevention to be supported and embedded within the work programmes of all our partners (including statutory, non-statutory, and voluntary and community sector organisations), ensuring that we are making clear progress in improving health and driving down health inequalities.

#### 1.3 For Information:

- 1.3.1 **Mental Health Section 136** – The Delivery Group received an update on work being undertaken locally to address issues around Section 136 of the Mental Health Act (the

police can use section 136 of the Mental Health Act to take people to a place of safety when they are in a public place; the Police can do this if they think someone has a mental illness and are in need of care), from Linda Izquierdo (Shropshire CCG).

1.3.2 Concerns regarding communication between the Police and Health colleagues and the use of Section 136 has prompted a working group to establish issues and resolutions in Shropshire. Issues with cross boundary working (across Staffordshire, Shropshire and Wales) as well as issues with available places of safety and staff availability are being considered.

1.3.3 Mental Health Awareness sessions are being delivered to relevant partners.

#### **1.4 For Information:**

1.4.1 **Deprivation of Liberty (DoL)** - The Delivery Group discussed the recent rise in applications of Deprivation of Liberty Safeguards in Shropshire following a Supreme Court ruling. The ruling as described below has required Adult Social Care to consider and plan for this rise in applications.

1.4.2 An excerpt from an article in Community Care by Mithran Samuel on March 19, 2014 in Adults, Deprivation of liberty, Legal, Mental Capacity Act:

‘All people who lack the capacity to make decisions about their care and residence and, under the responsibility of the state, are subject to continuous supervision and control and lack the option to leave their care setting are deprived of their liberty, ruled the court.

The ruling – in the cases of P v Cheshire West and Chester Council and P&Q v Surrey County Council - threw out previous judgements that had defined deprivation of liberty more restrictively.

The person’s compliance or lack of objection to their placement, the purpose of it or the extent to which it enables them to live a relatively normal life for someone with their level of disability were all irrelevant to whether they were deprived of their liberty, ruled the court.

This means that many people are likely to have been deprived of their liberty unlawfully and without safeguards in settings including care homes and supported living placements. This suggests that proper application of today’s judgement would see a significant hike in Dols case numbers regarding care home placements, and also applications to the Court of Protection to authorise deprivations of liberty in supported living.’

#### **1.5 For Information**

1.5.1 **Help 2 Change** – Shropshire Council Cabinet have agreed the development of Help 2 Change within IP&E (please see Additional Information below for more information about Help2Change). The business plan that will include details of how this will work and how Help 2 Change will take shape are currently under development and will come to the Health and Wellbeing Board for endorsement. In line with Shropshire Council policy the plans will be open for consultation.

## 1.6 For Information

1.6.1 **Pharmaceutical Needs Assessment (PNA)** – The responsibility for the development of the Shropshire Pharmaceutical Needs Assessment now rests with Shropshire Council. Public Health are working with the Local Pharmaceutical Committee to develop an appropriate questionnaire to gather information from Pharmacies. There will also be consultation with patient groups and other stakeholders. If you would like a copy of the draft questionnaire for pharmacies please contact Penny Bason (penny.bason@shropshire.gov.uk).

## 2. Recommendations

2.1 That the Board accept and provide any comment on sections **1.2 through 1.6**

## REPORT

### 3. Risk Assessment and Opportunities Appraisal

(NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)

3.1 The work of the Health and Wellbeing Board impacts on Health Inequalities; and all work being undertaken by the Board's work streams considers impact on health inequalities.

### 4. Financial Implications

4.1 There are no immediate financial implications associated with this report.

### 5. Background

5.1 The Health and Wellbeing Delivery Group (formerly the Health and Wellbeing Executive) meets monthly – 6 weekly and is responsible for the delivery of the Health and Wellbeing Strategy and the Better Care Fund.

### 6. Additional Information

News article [Help2Change](#)  
Cabinet [papers](#)

### 7. Conclusions

n/a

<b>List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)</b>
<b>Cabinet Member (Portfolio Holder)</b> Cllr. Karen Calder
<b>Local Member</b>
<b>Appendices</b>