

Committee and Date

Health & Wellbeing Board

21 March 2014

9.30 am

<u>Item</u>

2a

Public

MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 24 JANUARY 2014 AT 9.30 AM IN THE SHREWSBURY ROOM, SHIREHALL

Responsible Officer Karen Nixon

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PRESENT

Members:

Karen Calder Portfolio Holder for Health (Chairman)
Lee Chapman Portfolio Holder for Adult Services

Carole Hall substitute for Jane Randall-Smith, Healthwatch Shropshire

Prof. Rod Thomson Director of Public Health

Dr Caron Morton Accountable Officer, Shropshire CCG (Vice-Chairman)

Dr Bill Gowans Vice-Chairman Shropshire CCG

Jackie Jeffrey Chairman VCSA

Ros Francke substitute for Graham Urwin, NHS England

Officers and others in attendance:

Penny Bason Health & Wellbeing Co-ordinator
Andy Begley Head of Adult Social Care Operations

Lorraine Currie MCA/DoLS Manager Gerald Dakin Health Scrutiny Chair

Dr Julie Davies Director of Strategy and Service Redesign

Paul Haycox Shropshire CCG

Ruth Houghton Head of Social Care, Efficiency and Improvement

Kal Parkash Diversity Officer

Emma Sandbach Public Health Specialist, Shropshire Public Health

Madge Shineton Shropshire Councillor Sam Tilley Shropshire CCG

47. APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

- 47.1 Apologies for absence were received from Joyce Barrow, Young People's Scrutiny Committee Chair; Karen Bradshaw, Director of Children's Services; Stephen Chandler, Director of Adult Services; Ann Hartley, Portfolio Holder for Children's Services; Helen Herritty, Shropshire CCG; Jane Randall-Smith, Chairman, Shropshire Healthwatch; Paul Tulley, Shropshire CCG; Graham Urwin, Director Shropshire and Staffordshire Area Team, NHS England
- 47.2 Substitutions notified were as follows: Carole Hall substituted for Jane Randall-Smith (Shropshire Healthwatch) and Ros Francke substituted for Graham Urwin (NHS England).

48. MINUTES

- 48.1 Arising thereon; the Chair asked for a timeline at Minute 35.7. It was agreed that this work would be ready to report back to the H&WB in March 2014. Subject to the foregoing it was duly
- 48.2 **RESOLVED:** That the Minutes of the Health and Wellbeing Board meeting held on the 22 November 2013, be approved and signed by the Chairman as a correct record.

49. PUBLIC QUESTION TIME

49.1 There were no public questions.

50. DISCLOSABLE PECUNIARY INTERESTS

50.1 There were none.

51. WINTERBOURNE VIEW

- 51.1 The Board received and welcomed a progress report on joint work on the Winterbourne View Review and Concordat copy attached to signed Minutes by Shropshire Council and the Shropshire CCG. Overall good steady progress was being made
- 51.2 The Chairman asked about how and on what basis the independent review of Learning Disability residential services would be undertaken by Healthwatch. It was agreed that conversations would be had by officers after the meeting to agree a way forward.
- 51.3 The Accountable Officer for Shropshire CCG welcomed the report and highlighted that it would be useful if a mapping exercise could be undertaken showing where Adults with Learning Disabilities were placed throughout Shropshire, enabling GP's to link in to this information aswell.

51.4 **RESOLVED**:

- a) That the progress made to date on compliance with the Winterbourne View Concordat recommendations be noted.
- b) That the feedback received from the LGA and NHS England on the stock take submitted by Shropshire be noted.
- c) That a wider learning Disability Report be submitted to the Health and Wellbeing Board on an annual basis on the three work streams governed by the Learning Disability Programme Board as set out in the summary in the report.
- d) That Healthwatch Shropshire be requested to discuss with Adult Social Care the possibility of providing an independent view of Learning Disability residential services in Shropshire.
- e) That it be noted that pooled funding arrangements would be addressed in part as Better Care Funding came on stream.

52. DEPRIVATION OF LIBERTY SAFEGUARDS

- 52.1 A report on Deprivation of Liberty Safeguards, introduced in April 2009 as an amendment to the Mental Capacity Act 2005, was received by Members. The safeguards provided protection for vulnerable people against arbitrary detention. They apply to people 18 and over who lack mental capacity to consent to be accommodated in hospitals or care homes and apply only where the person has a mental disorder and where care or treatment cannot be provided in a less restrictive way.
- 52.2 The report covered information about levels of DoLS activity in 2012/13 for hospitals and care homes in Shropshire and a comparison with the West Midlands. Areas of regional and national engagement were also highlighted.
- 52.3 It was noted that training and promotion courses were provided across the health and social care workforce and that demand was growing. A specific request was made for more information about training provided to the primary care sector in Shropshire, including the percentage of staff trained.
- 52.3 Joint working arrangements had been confirmed between Shropshire Council and Shropshire Clinical Commissioning Group from 2013 onwards which was welcomed. However concern was expressed that the joint arrangement did not include Telford and Wrekin Clinical Commissioning Group or T&W local authority due to a distribution problem with funding. Ros Francke, NHS England representative, undertook to look into this after the meeting.
- 52.4 Case studies provided at Appendix 2 were welcomed as a good tool with which to put the contents of this report into context.

52.5 **RESOLVED**:

- a) That the Health and Wellbeing Board receive quarterly statistics in relation to DoLS applications and analyse them relative to the other West Midlands authorities.
- b) That the Health and Wellbeing Board receive reports from the MCA/DoLS Operational Group which meets quarterly.
- c) That the Health and Wellbeing Board receive a report following Shropshire's participation in the West Midlands regional peer audit.
- d) That training information be provided for primary care showing the percentage of staff trained and that this be regularly updated.
- e) That Ros Franke (NHS England) be requested to remedy any funding distribution problems connected to Telford and Wrekin Clinical Commissioning Group and the local authority.
- f) That staff be commended for their excellent work.

53. JSNA - HEALTH INEQUALITIES

53.1 The Director of Public Health introduced and amplified a report – copy attached to signed Minutes – which highlighted the story of Shropshire with regard to health inequalities; demonstrated the health inequalities in Shropshire and where they existed, what was currently being done to reduce these inequalities, what other partnership groups were doing to reduce inequalities: and to highlight what more we

- could do as a Health and Wellbeing Board to make Shropshire a leader in reducing health inequalities.
- 53.2 Following much discussion about how everyone needed to work together in partnership and engage more it was agreed that a tangible priority was required; something everyone could champion to change in Shropshire, such as earnings ratios for staff for example.
- 53.3 The Director of Public Health suggested that in making links with the business sector it would be hoped that they could work together to positively influence how things were done in their organisation, make Shropshire a better place to invest in and make employment more accessible. It was highlighted that the voluntary and community sector could contribute in kind too, if not financially.
- 53.4 It was agreed that Appendix C needed to be more robust, especially the third bullet point down. In the last bullet point, it was agreed that reference needed to be made to the way we commission outcomes, principles and structures. It was requested that social mobility also be included. Subject to the foregoing, it was agreed that an updated charter be submitted back to the 21 March meeting for approval.

53.5 **RESOLVED:**

- a) That the Health and Wellbeing Board continue to support the increase of investment in prevention programmes across organisations and partnerships in order to reduce health inequalities and that progress on this be reported back to the Health and Wellbeing Board in 6 months time (July 2014).
- b) That the Health and Wellbeing Board enhance joint working with the Business Board, the Local Enterprise Partnership and the Local Nature Partnership to address Inequalities and that the Director of Public Health formally links in to the Business Board.
- c) That the Health and Wellbeing Board provide a collective response to the Marches LEP European Structural and Investment Funds Strategy.
- d) That the Health and Wellbeing Board support the voluntary and community sector by endorsing the Compact (draft copy at Appendix B) and encourage relevant statutory partners and provider organisations to sign up to the Compact;
- e) That the Health and Wellbeing Board discuss the draft Equalities Charter (with any proposed amendments) and endorse its ratification across the Health Economy (Appendix C) once this has been updated to be more robust and reported back to the 21 March meeting.
- f) That the Health and Wellbeing Board note and support the development of a Social Value Framework for Shropshire (described in section 5.24 of the report).

54. THE LEP EUROPEAN STRUCTURAL & INVESTMENT FUND STRATEGY

- 54.1 The Health and Wellbeing Co-ordinator introduced and amplified a report copy attached to signed Minutes on a consultation by the Marches Local Enterprise Partnership (LEP) about their Structural Investment Funds Strategy 2014 -2020: Five Strategic Priorities.
- 54.2 At Response 3 of the questionnaire, the first bullet point was amended to read 'Reducing inequalities and ensuring fair wages'.

- 54.3 At Response 6 of the questionnaire Ruth Houghton requested that targeted groups, include adults with mental health and learning difficulties
- 54.4 It was requested that 'normalisation', which does not have a financial cost, also be included in this document.

54.5 **RESOLVED**:

That subject to the foregoing, the Board approved the draft response, for submission immediately following the Health and Wellbeing Board meeting on the 24th of January 2014.

55. CHILDREN AND YOUNG PEOPLE & FAMILIES PLAN REFRESH

55.1 A report by the Director of Children's Services – copy attached to signed minutes – was received by Members.

55.2 **RESOLVED**:

- a) That the Health and Wellbeing Board support the development of a refreshed Children Young People and Families Plan, noting that the Trust delivers the priority of Improving the emotional wellbeing and mental health of children and young people, by focussing on prevention and early support for the Health and Wellbeing Board;
- b) That the Health and Wellbeing Board note the strong links between the Board and the Children's Trust with regard to health inequalities and reducing child poverty.

56. BETTER CARE FUND AND S.256 AGREEMENT

- The Committee received the report of the Shropshire Clinical Commissioning Group (CCG) copy attached to the signed Minutes on the current joint strategic position across Shropshire CCG and Shropshire Council in relation to the implementation of the Better Care Fund (formerly the Integrated Transformation Fund), the performance monitoring requirements, the financial implications and key areas of work associated with it.
- Progress to date was good bearing in mind its rapid introduction and that final guidance was published in December 2013. It was noted that it was hoped to be more transformational and inspirational and the Task and Finish Group requested that the Fund be carried out in two phases
- 56.3 There was some concern about bringing providers into this, but initial discussions with providers had been positive a workshop scheduled for the following week would help in moving this element forward.
- 56.4 It was requested that Reablement be included in the Forward Plan.

56.5 **RESOLVED**:

Part One - Better Care Fund

- a) That the Fund be used to support the overarching themes of Prevention, Living Independently for Longer, Long Term Conditions and Managing and Supporting people in Crisis.
- b) That the Better Care Fund supports the key priorities set out in the JSNA and Health and Wellbeing Strategy.

- c) That the implementation of the Fund be carried out in two phases for 2014/5 and 2015/16 as set out in the report.
- d) That the Task and Finish Group will continue to meet to further develop the next stage of the plans required to implement the Fund and the required submission to NHS England.
- e) That the Task and Finish group will continue to develop the local financial plans required for implementation in 2015/16 which will be presented to the Health and Wellbeing Board in September 2014.
- f) That the final selection of the local performance indicator be delegated to the Task and Finish Group.
- g) That the Task and Finish Group develop a Better Care Fund risk register, of which the first draft will be presented to the Health and Wellbeing Board in March 2014.
- h) That the Task and Finish group will develop more detailed recommendations regarding the governance arrangements for the Better Care Fund which will be presented to the Health and Wellbeing Board in March 2014.

Part Two – S256 Agreement

- a) That the activity to date against each of the expenditure allocations be noted.
- b) That annual performance activity against the suite of Local Authority performance indicators (both national and local indicators) be reported to the board in the Summer of each year once validated 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.

57. MATERNITY SERVICES REVIEW

- 57.1 The Accountable Officer, Shropshire CCG introduced this item copy of report attached to signed minutes and explained the background to this Review. Healthwatch queried the engagement element of the Review and the implementation of recommendations.
- 57.2 A brief discussion ensued and the Accountable Officer clarified that it was proposed to re-establish a new Maternity Liaison Committee, which would involve stakeholders and users. It was agreed that a progress report on actions would be made to the Board in 6 months time.
- 57.3 Looking ahead it was considered important to connect this report to the Clinical Services Review, which was another important piece of work.

57.4 **RESOLVED**:

- a) That the report be received and that a progress report on its implementation be made back to the board in 6 months time (July 2014)
- b) That the recommendations to Shropshire CCG Governing Body Board which were presented to the Board on 11 December 2013 and approved, be noted.

58.	DATE	OF NEXT	MEETING
JO.	DAIL	OF NEAT	

58.1 **RESOLVED:** That the next meeting of the Health and Wellbeing Board be held at 9.30am on Friday 21 March 2014 in the Shrewsbury Room at Shirehall, Shrewsbury, SY2 6ND.

Chairman :	 	
Date :		

The meeting finished at 11.30 am