Time began: 1.05pm Time ended: 2.35pm

Health and Wellbeing Board 16 May 2013

Present

Chair: Councillor Bayliss

Elected members: Councillors Hussain, Rawson, Skelton and Webb

Co-opted officers of Derby City Council: Cath Roff

Co-opted officers of Southern Derbyshire Clinical Commissioning Group: Andy Layzell

Co-optees of other organisations: Matt Allbones (Community Action Derby), Tracy Allen (Derbyshire Community Healthcare Services), Doug Black (NHS Commissioning Board Local Area Team), Dionne Reid (Women's Work, Derbyshire), Andy Waldie (Derbyshire Fire and Rescue Service)

Substitutes: Jessica Davies (Derby Healthwatch, substitute for Steve Studham), Ifti Majid (Derbyshire Healthcare Foundation Trust, substitute for Steve Trenchard), Alison Wynn (Derby City Council, substitute for Derek Ward)

Non board members in attendance: Frank McGhee (Derby City Council)

8/12 Apologies

Apologies for absence were received from Councillor Williams, Andrew Bunyan, Sheila Newport, Steve Studham, Steve Trenchard, Derek Ward, Adam Wilkinson

9/12 Late items to be introduced by the Chair

There were none.

10/12 Declarations of Interest

There were no declarations.

11/12 Minutes of the meeting held on 14 March 2012

The minutes were agreed as a correct record.

12/12 Derbyshire Health Protection Board

The board received a report from the council's Director of Public Health detailing the key messages from the Derbyshire Health Protection Board. The report was presented by the Deputy Director of Corporate Public Health.

It was reported that the board would provide regular reports to the Health and Wellbeing Board. Key messages following the meeting of the Derbyshire Health Protection Board on 18 March 2013 were:

- Public Health England were working closely with the NHS England Local Area Team
 (covering Nottinghamshire and Derbyshire) and had established teams to take forward
 the Screening and Immunisation agendas from 1 April 2013. Roles and responsibilities
 had been agreed and details of key contacts would be provided;
- It was expected that all existing assurance arrangements would continue over the first year, ensuring a continuity of service;
- Local management arrangements for screening and immunisation in Derbyshire would continue to be managed through the programme boards that were already in place; and
- The board has identified and discussed possible risks associated with the transition process and assurances had been received for most of these. Plans for mitigation had been put in place for a small number of identified risk areas, which would be reviewed again in July.

Resolved to note the key messages and agree to receive regular updates.

13/12 Development of an Adults Commissioning Board

A report of the council's Strategic Director for Adults, Health and Housing was presented. It proposed that the work of the board need to be underpinned by appropriate partnership working to enable it to make strategic decision that were fully informed by engagement and analysis across organisational boundaries. It was proposed that an Adults Commissioning Board be established to developed increased integration of commissioning activity in order to deliver the strategic objectives for adults that have been identified. Terms of reference detailing proposed reporting arrangements were also presented.

The establishment of the new board was broadly welcomed, but clarification was sought relating to membership, including whether there would be any voluntary sector representation and whether specialists would be co-opted on to the board. The strategic director stated that the commissioning role of the new board would prevent the voluntary sector representation but that it was hoped there would be involvement from representatives of these organisations at project stage. It was also explained that there would be no co-opting of specialists for similar reasons.

Resolved to:

1) Agree to the establishment of an Adults Commissioning Board; and

2) Agree the governance and reporting arrangements for the Adults Commissioning Board as reported to the meeting.

14/12 Southern Derbyshire CCG Delivery Plan 2013-14

A report of the Chief Operating Officer of the Southern Derbyshire Clinical Commissioning Group was presented. The report set out the CCG's Delivery Plan for 2013-14 including its priorities and investment plan.

It was reported that the CCG's mission was to continuously improve the health and wellbeing of the people of Southern Derbyshire, using all resources as fairly as possible. The principles and objectives that would deliver this mission statement were detailed in the Delivery Plan.

Members welcomed the Delivery Plan but asked a number of questions about the introduction of the 111 service and how it would fit in with walk-in services. The Chief Operating Officer confirmed there had been some teething problems nationally. It was reported that the service had been working effectively in Derbyshire although there had been some knock-on effect following an investment of time in dealing with issues in Nottinghamshire and Northamptonshire, which had resulted in a fall in response times. In response to further questions, it was confirmed that ambulance response times were not an issue in the city, although there were problems elsewhere in Derbyshire.

Resolved to note the content of the Delivery Plan and support the development of a Prospectus for the public.

15/12 Joint Strategic Needs Assessment

An update report by the Director of Public Health on the Joint Strategic Needs Assessment was presented by the Deputy Director of Corporate Public Health.

It was explained that local authorities and clinical commissioning groups had an equal and joint duty to prepare JSNAs, to be exercised through the board. The report set out proposals detailing how this would be practically coordianted. With specific regard to the different geographical boundaries of the local authority and the CCG, the Medical Director of the NHS Commissioning Board Local Area Team recommended that the JSNA should reflect city boundaries as this covered the board's area of responsibility.

Resolved to agree that:

- The Director of Public Health act as Senior Responsible Officer to take a lead in ensuring the development and production of the JSNA;
- 2) A JSNA Working Group be established including representation from key stakeholders;
- 3) An updated JSNA be produced, primarily in electronic and interactive form which can be easily updated, in conjunction with an Asset Assessment in September 2013;

- 4) All organisations represented on the board provide a named contact to enable appropriate engagement;
- 5) A paper be prepared for the board's commissioning sub groups to ensure appropriate commissioner engagement; and
- 6) The JSNA working group offers guidance on the geographical scope of the JSNA.

16/12 Maternity Services Health Needs Assessment

A report of the Director of Public Health was presented by the Deputy Director of Corporate Public Health. It was reported that the Maternity and Newborn Strategy Group was reviewing and updating its strategy, which would inform its commissioning intentions for 2014/15.

Resolved to note the report, support the engagement and input of relevant partners as appropriate and receive a report on the resulting strategy following consideration by the Children and Young People's Integrated Commissioning Group.

17/12 Measles Briefing for Derbyshire and Nottinghamshire

A report of the Director of Public Health was presented by the Deputy Director of Corporate Public Health. The report related to the Public Health England Centre campaign to raise awareness of the MMR vaccination following rising numbers of measles cases.

Resolved to note the local response and to support the work of the Measles Rapid Task and Finish Group.

MINUTES END