

# ITEM 4

Time commenced: 1.00pm

Time finished: 2.14pm

**Health and Wellbeing Board**  
**18 May 2017**

**Present**

**Chair:** Councillor Repton

**Elected members:** Councillors Care, Hudson, Skelton and Webb

**Appointed officers of Derby City Council:** Andy Smith, Perveez Sadiq.

**Appointed representatives of Southern Derbyshire Clinical Commissioning Group:** Dr Richard Crowson.

**Appointees of other organisations:** Ifiti Majid (Derbyshire Healthcare Foundation Trust), Gavin Boyle, (Chief Executive Derby Teaching Hospitals NHS Foundation Trust), Cath Cawdell (Community Action Derby),

**Substitutes:** Steve Wood (for Paula Holt, Derby University), Helen Dillistone (for Gary Thompson, Southern Derbyshire CCG), Kevin Gillott (for Hardyal Dhindsa Derbyshire Police and Crime Commissioner), James Moore (for Steve Studham (Derby Healthwatch).

**Non board members in attendance:** Alyson Wynn (DCC), Robyn Dewis (DCC), Caroline Maley (Acting Chair of Derbyshire Healthcare Foundation Trust).

## 56/16 Apologies

Apologies for absence were received from Councillors Banwait and Bolton. Apologies were also received from: Iain Peel (DCC), Cate Edwynn (DCC), Dr Paula Holt (University of Derby), Tracy Allen (Derbyshire Community Healthcare Services), Gary Thompson (Southern Derbyshire CCG), Hardyal Dhindsa (Derbyshire Police and Crime Commissioner), Gary Thompson (Southern Derbyshire Clinical Commissioning Group), Sarah Edwards (Children & Young People's Network and Gavin Boyle (Derby Hospitals NHS Foundation Trust), Gavin Tomlinson and Alex Johnson (Derbyshire Fire and Rescue Service), Suzanne Horobin (East Midlands Clinical Network).

## 57/16 Late items to be introduced by the Chair

There were no late items.

## 58/16 Declarations of Interest

There were no declarations.

## 59/16 Minutes of the meeting held on 3 March 2017

The minutes were agreed as a correct record.

## 60/16 **Joined Up Care Derbyshire Sustainability and Transformation Partnerships – Update**

The Board were updated by the Acting Chief Executive of Derbyshire Healthcare Foundation Trust and the Deputy Chief Officer of NHS Southern Derbyshire Clinical Commissioning Group (CCG) regarding the position of the implementation of the Joined Up Care Derbyshire Sustainability Partnerships. It was stated they were not in the position they had hoped to be in in the New Year and the funds required to fully implement Joined Up Care Derbyshire as planned were not released. This had led to a 'pause' whilst the plan was reconsidered and re-phased. This work was still ongoing and had led us to a point where we were now able to start moving forward again as a Sustainability and Transformation Partnership (STP), partnerships of care providers and commissioners in an area). This report provided an update on the national and local progress of STPs.

['Next Steps on the NHS Five Year Forward View'](#)<sup>1</sup> published in March 2017 confirmed the national commitment to STPs. The report stated that the aim was "to use the next several years to make the biggest national move to integrated care of any major western country", and, '...will take the form of Sustainability and Transformation Partnerships covering every area of England, and for some geographies the creation of integrated (or 'accountable') health systems'. The report detailed what the implementations were and how they would be implemented.

The report stated that Accountable Care Systems would be 'evolved' versions of Sustainability and Transformation Partnerships where commissioners and providers of health and care, '...choose to take on clear collective responsibility for resources and population health...' and will, '...provide joined up, better coordinated care and the priorities and focus of Derbyshire Sustainability and Transformation Partnership was fully consistent with this national direction.

Board members heard that National funding had now been allocated to Derbyshire to improve cancer, mental health and diabetes services.

Current local priorities continued to be:

- Develop 'place based care' – including supporting the developing General Practice
- Progress towards a single Strategic Commissioner for health services in Derbyshire and greater collaboration between providers
- Develop implementation plans – which were expected to be submitted in June 2017 to NHS England and NHS Improvement.

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<sup>1</sup> NHS England (2017) *Next Steps on the NHS Five Year Forward View*. NHS England, March 2017.

**Resolved to note the continued commitment and progress being made both nationally and in Derbyshire towards the implementation of Sustainability and Transformation Partnerships.**

## **61/16      Accident & Emergency Services Delivered at Derby Teaching Hospitals Foundation Trust and the role of the Derbyshire Accident & Emergency Delivery Board**

The Board received a report which was presented by the Chief Executive of Derby Teaching Hospitals NHS Foundation Trust which stated the Royal Derby Hospital provided the only Adult and Children's Emergency Department (ED) in the South Derbyshire area, this served the population of 548,000 people and it was supported by the Minor Injury Units at Ripley, Ilkeston and the Derby Urgent Care Centre in the city centre.

The report gave an overview of the ED services the Royal Derby Hospital provides, stating that it has the only Adult and Children's Emergency Department (ED) in the South Derbyshire area, this serves the population of 548,000 people, 34,600 or 13.9% of which were born outside of the United Kingdom. Additionally in South Derbyshire the Emergency Department was supported by the Minor Injury Units at Ripley, Ilkeston and the Derby Urgent Care Centre in the city centre.

There were two distinct areas within the Royal derby Hospital ED, one for adult emergencies and one for children's emergencies, providing care for a combined total of 139,544 patients during 2016/7 financial year.

The report listed the services offered in the Adult and Children's Emergency Department they included:

- Pit Stop/Streaming/Triage services - an advanced initial assessment area where patients can be effectively processed to the right area of the ED for their treatment.
- Resus – a 6 bedded adult and a 2 bedded children's resuscitation room where patients whose condition carries the possibility of being immediately life threatening can be assessed and treated.
- Treatment bays (Majors) – where patients with significant pathology can receive optimal treatment requiring nursing input, close monitoring, investigations and treatment.
- Triage/ see and treat rooms (Minors) – where patients with minor injury/illness can be treated immediately and discharged from

- An area with a number of assessment and procedure cubicles where patients with more Minor conditions can be cared for, such as fractured limbs, lacerations or minor illness
- Plaster room.
- Relatives rooms to provide care for families of the sickest patients or those who are bereaved.

A six-bedded in-patient ward was also located adjacent to the adult department to facilitate lengthier patient observation (Ward 101), along with a 5 bedded Paediatric Observation Unit (POU) is adjacent to the Children's Emergency Department and is open from 7:30am to 11pm seven days per week. This enabled continuity of care for patients requiring short term observation and prevents them being transferred to an inpatient ward, only then to be discharged soon afterwards. Since opening the number of admissions to Paediatrics from Children's Emergency Department reduced by 18% despite an increase of 7% in the number of attendances.

The report aided the Board in understanding the delivery of A & E provision within Derby thereby supporting the Health and Wellbeing Board in its duty to improve the health and wellbeing of the local population.

The Board discussed the perception of inappropriate attendance at A & E and were assured that whilst the nature of attendances was changing there weren't any statistics which supported increased inappropriate attendance.

**Resolved to note the report**

## **62/16      Progress Report on the Derbyshire County and Derby City Air Quality Working Group**

The Board considered a report of the Derbyshire County and Derby City Air Quality Working Group, the report informed the Board that a Derbyshire Wide Air Quality working group had been established to provide assurance to the City and County Health and Wellbeing Boards on the management, monitoring, planning and response to air quality issues across Derbyshire.

The group comprised of representatives from Derby City Council, Derbyshire County Council, Borough and District Council, Sustainable Transport (Sustrans) and the Chamber of Commerce.

The Board heard that the work planned for the year ahead included supporting Clean Air Day in June and development of a county wide air quality strategy.

**Resolved to:**

- a) note the report
- b) receive annual updates
- c) support the work plan of the air quality working group including the development of an Air Quality Strategy and the implementation of supplementary planning guidance and engagement with the national Clean Air Day.

## 63/16      **Response to the Derby Safeguarding Children Board's Annual Report 2015 - 2016**

The Board considered a report presented by the Strategic Director of people which stated the Health and Wellbeing Board (HWB) received the Derby Safeguarding Children Board (DSCB), Annual Report 2015-16. The report provided an assessment of the performance and effectiveness of local services and included lessons from reviews published during that year. The report demonstrated how effectively the DCSB carried out the functions of a Local Safeguarding Children Board (LSCB) as set out in Working Together 2015.

The DSCB Annual Report was a public report that was formally presented to the City Leadership Board and to the Children, Families and Learners Board, the Chief Executive, Leader of the Council, the local police and crime commissioner and the Chair of the Health and Wellbeing Board.

The Board received the report and noted the priorities for the coming year:

- early help arrangements
- domestic violence and abuse
- child sexual exploitation and neglect.

The Health and Wellbeing Board had been asked to:

- Ensure centrality of safeguarding children in strategic decisions.
- Ensure that commissioning decisions support the DSCB priorities.
- Safeguarding Impact Assessments on budget and organisational change.
- Report back to the DSCB on action that has been taken.

At point 1.5 the report stated during the previous year, the HWB had remained committed to the safeguarding of children and vulnerable adults and had received a number of reports relating to the DCSB priorities, and safeguarding more broadly. Examples included: New Psychoactive Substances Partnership Strategy 2015 – 2018 – the Safeguarding Board was a key partner in its development; updates on the local response to the special educational needs and disability (SEND) reform programme – including needs assessment; evaluation of the Derby Smile 4 Life oral health promotion pilot; childhood immunisation uptake; sexual violence needs assessment; and an update on the Mental Health Crisis Care Concordat.

**Resolved to:**

- a) To reaffirm the HWBs continued support of the DSCB and the four key priorities identified in its Annual Report**
- b) To approve the addition of a 'safeguarding' section to the implications section of the HWB report template to ensure the centrality of safeguarding children and adults in the strategic decisions of the HWB**
- c) That Members of the HWB with commissioning responsibilities ensured that any relevant commissioning decisions support the DSCB priorities**
- d) Recommend that HWB partner organisations carried out Safeguarding Impact Assessments on any budget and organisational changes**
- e) That a copy of this report and associated minutes were provided to the Chair of the DSCB to report the actions undertaken by the HWB in response to the DSCB Annual Report 2015-16.**

## **64/16      Pharmaceutical Needs Assessment**

The Board considered a report of the Assistant Director of Public Health which stated the Health and Social Care Act 2012 had amended the National Health Service Act 2006 which transferred the responsibility for producing and revising Pharmaceutical Needs Assessments (PNAs) from Primary Care Trusts (PCTs) to Health and Wellbeing Boards (HWBs) with effect from 1 April 2013.

Furthermore in accordance with The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, each Health and Wellbeing Board must:

- Assess needs for pharmaceutical services in its area
- Publish a statement of its assessment and any revised assessment.

The above was due to be completed by 1 April 2015, following which each Health and Wellbeing Board was required to publish a statement of its revised assessment within three years of its previous PNA. Therefore the Health and Wellbeing Board were required to publish a revised assessment by April 2018

The regulations referred to also set out the minimum information requirements of a PNA. These requirements could be found in Appendix 2.

**Resolved to:**

- a) Note the Board's responsibility to develop a revised PNA by 1 April 2018**
- b) The Board approved the production of a joint PNA covering both Derby and Derbyshire Health and Wellbeing Board areas**

- c) **Agree to receive future updates and the final PNA for approval as set out in point 1.9.**

## **65/16 Health Protection Board Update**

The Board considered a report which provided an overview of the key messages arising from the Derbyshire Health Protection Board, which met on the 3 May 2017. The key messages were:

- A detailed report from NHS England on the Diabetic Eye Screening programme, highlighted overall good performance and work by the provider to improve uptake noted.
- A report which stated the Hepatitis B vaccination is being added to the routine infant immunisations. Previously this vaccine was only offered to infants identified to be at risk and this brings the schedule in line with many other Countries.
- A verbal update was received regarding community engagement work to address the decline in immunisation and cervical uptake across Derby City.

**Resolved to note the update report.**

**MINUTES END**