

Time commenced: 1.32pm
Time finished: 2.53pm

Health and Wellbeing Board 8 May 2014

Present

Chair: Councillor Paul Bayliss

Elected members: Councillors Tittley, Skelton and Webb

Co-opted officers of Derby City Council: Derek Ward, Cath Roff, Andrew Bunyan

Co-opted representatives of Southern Derbyshire Clinical Commissioning Group: Dr Shelia Newport

Co-optees of other organisations: Paula Crick (University of Derby), Steve Trenchard (Derbyshire Health Foundation Trust), Terry McDermott (Derbyshire Fire and Rescue Service), Steve Studham (Derby Healthwatch), Andy Layzell (Southern Derbyshire Clinical Commissioning Group), Sue James (Derby Hospitals NHS Foundation Trust)

Substitutes: Hardyal Dhindsa (Deputy Police and Crime Commissioner for Alan Charles), Kath Caudwell (Community Action Derby for Matt Allbones).

Non board members in attendance: Frank McGhee, Adam Wilkinson

62/13 Apologies

Apologies for absence were received from Councillors Rawson, Allen and Williams, Tracy Allen, Alan Charles, Matt Allbones, Simon Griffiths, John Tomlinson, Paul Robinson, Doug Black, Dionne Reid

63/13 Late items to be introduced by the Chair

There were no late items.

64/12 Declarations of Interest

There were no declarations.

65/13 Minutes of the meeting held on 13 March 2014

The minutes were agreed as a correct record.

Minute 42/13 Under 5's Services in Derby

Hardyal Dhindsa raised concerns that not enough content had been included in relation to the problem of female genital mutilation and that this problem had been underplayed. Hardyal Dhindsa reported that he had recently attended a conference on forced marriage and the problem of female genital mutilation was discussed there. Hardyal Dhindsa expressed concerns that this had been a criminal matter for 20 years, but there had never been a prosecution in Derby. It was agreed that health workers on the frontline should be encouraged to report and matters or concerns of this nature.

Resolved to action and ensure frontline health visitors understand the enormity of the problem.

Items Requiring Decisions by the Board

66/13 Winter Pressures – Emergency Admissions over the Winter Period

The Board considered a report of the Chief Officer of the Southern Derbyshire Clinical Commissioning Group relating to the strain on health and social care services during the winter months. It was acknowledged that the performance of the NHS was usually judged by the percentage of patients who were seen in Accident and Emergency and were either discharged or admitted within four hours. The enormous amount of joint work over this six month period was noted. Additional papers were circulated detailing the performance and target graphs for the board members information.

It was noted that the accident and emergency performance statistics was only a sample of how the whole system in Southern Derbyshire Health and Social Care Services operated and discussion was held on the performance of the four work streams. It was noted that Nottinghamshire and Leicestershire's performance statistics were not as good as Southern Derbyshire's. Councillor Tittley stated this was note worthy and that compliments should be given to all colleagues involved for their hard work.

Discussion was held on the issue of alcohol related admissions and it was agreed that this was an area that needed focusing on. Steve Trenchard agreed to provide all Board members with further details. Derek Ward confirmed that alcohol and substance misuse services were being recommissioned over the coming year with a go live date for the new integrated model of 1st April 2015.

Sue James also acknowledged that a large amount of admissions to accident and emergency were elderly patients. Derek Ward added that a new data source was being explored (PI Benchmarks) to identify key groups that were at risk and what additional services may need putting in place. Councillor Webb added that the CCG were continuing to work with local GPs in order to treat more older patients at the local surgeries. Andy Layzell confirmed that more staff were being recruited to the Community Support Teams working with the GPs and were able to identify people and risk and put additional support in place.

Dr Shelia Newport reported that the GPs' contract changed in April 2014. Changes were made in the times that GPs conducted home visits and it was hoped this would result in people arriving at accident and emergency departments earlier rather than late afternoon after the GP had visited after morning surgery. A white board system in the accident and emergency department was also proving to be a very efficient way of getting people through the system in the specified four hours.

Sue James reported concerns that a number of the initiatives that had been put in place to handle winter pressures were funded non-recurrently and therefore there was a risk that they would not be available for 14/15.

Resolved

- 1. To note the good performance of the health and social care system over the last 6 months.**
- 2. To thank and compliment all involved for their hard work especially when data was compared with Nottinghamshire and Leicestershire's results.**
- 3. To recognise that a number of the initiatives that were successful during the winter have only been funded non-recurrently through additional funding received during 2013.**

67/13 Health and Wellbeing Strategy Development

The Board considered a report, supported by a Powerpoint presentation, of the Director of Public Health giving details of a number of processes that had been planned to support the development of the Health and Wellbeing Strategy, along with ideas for forming a new strategy.

The Director of Public Health gave the Board an update on the recent Live Well for Longer event which was held on 18 March 2014 and asked the Board for their thoughts on whether the Health and Wellbeing strategy should be fundamentally changed or just tweaked slightly. Councillor Bayliss stated this should be structured around the Derby plan and Hardyal Dhindsa felt all partners should be more informed. Councillor Tittley commented that mental health was a big area of concern and there did not seem to be a national approach for tackling this. Councillor Tittley expressed surprise that the issues outlined by the Beverage Report were still relevant today, some 60 years on.

Dr Shelia Newport reiterated the need to continue investing funding into preventative areas such as stop smoking services and healthy lifestyles. It was acknowledged that this, along with the underlying work, needed building into the plan. Cath Roff added that the concept of hospitals and primary care needed to change and these needed to communicate with the citizens more.

Councillor Webb expressed shock at the figures for self harming amongst young people. Steve Trenchard confirmed that this was being addressed and had been linked to psychological problems. Steve Trenchard and Derek Ward were to discuss further outside the meeting.

Steve Trenchard questioned the difference between the system now and when it was first developed 65 years ago adding the need to focus on citizens' current lifestyles in order to limit the burden on the health service in future years.

The Board agreed that the Health and Wellbeing strategy should be the catalyst and driver of system change for the health and social care system. It was agreed that the Board should take on the role of system leadership for the health and social care model for the city.

Derek Ward summarised that two key areas for the HWB Strategy to cover would be ensure parity of esteem for mental health with physical health & outlining a vision of what the health and social care system should look like for the city in the coming years. He also expressed thanks to Alison Wynn for preparing the draft strategy and informed the board that these would be circulated for comments and amendments to be bought back to the Board at the July meeting.

Resolved to receive the presentation and agree a number of priority issues for potential focus within the Health and Wellbeing Strategy.

68/13 Health and Wellbeing Board Development

The Board considered a report of the Strategic Director of Adults, Health and Housing and the Director of Public Health confirming that Health and Wellbeing Boards had now been in place for a year and how they had developed across England.

Cath Roff informed the Board that a Health and Wellbeing System Improvement programme for 2014/15 had been developed as part of an integrated support offer across health and social care managed by the Local Government Agency and funded by the Department of Health. The Board was updated as to what this entailed including the implementation of the self-assessment tool to identify the current Board's strengths and weaknesses allowing them to identify the development priorities. The paper asked that the members of the Board take part in an evaluation of learning needs. This evaluation would help the Board identify both strengths and weaknesses and would also help to inform an organisational development plan to help members take on the role of system leaders.

Resolved

- 1 To agree the use of the LGA Self-Assessment Tool as a basis to evaluate the current position of the HWB and identify priority areas of development.**
- 2 For individual Board members to agree to participate fully in the self assessment process.**

69/13 Think Families Principles

The Board considered a report of the Strategic Director of Adults, Health and Housing and the Strategic Director of Children and Young People detailing a new care bill requiring agencies to take into account the needs of the family when accessing an adult. The Care Bill was to be enacted into legislation from April 2015 and Andrew Bunyan requested that the Board support the adoption of Think Family principles across all relevant agencies.

Resolved

- 1. To support the active adoption and sign up to the Think Family principals for all agencies working across Health and Social Care in Derby at a senior level.**
- 2. To support the widening of existing auditing arrangements to cover the audit of Think Family principles for Health and Social Care agencies.**

70/13 Children and Young People Commissioning Arrangements

The Board considered a report of the Strategic Director of Children and Young People relating to the commissioning arrangements for Children and Young Peoples Health services. It was acknowledged that the current configuration needed refining and that it needed to be aligned more closely across Public Services whilst focusing more on the outcomes.

The Board acknowledged that initial discussions had already taken place with the CCGs, Public Health and County colleagues and it was felt that integrated commissioning services were needed for Children and Young Peoples Health Services.

Resolved

- 1. To support the discussions taking place with CCGs and County.**
- 2. To support the greater integration of Children and Young Peoples commissioning arrangements.**

Items for Information

71/13 Health Protection Board Update

The Board received a report from the Director of Public Health providing them with an update of key issues which were raised at the Derbyshire Health Protection Board meeting which was held on 14 April 2014.

The report gave updates regarding new National Immunisation Programmes which included Adolescent tetanus, diphtheria and polio.

The report also confirmed that the seasonal flu vaccination had now been implemented through primary care and was now available to all two and three year old children.

Resolved to note the contents of the report.

72/13 Better Care Fund

The Board received a report of the Strategic Director of Adults, Health and Housing and the Chief Officer of Southern Derbyshire Clinical Commissioning Group. The report detailed how an integrated transformation fund (Better Care Fund) had been set up in June 2013. The aim of the fund was to accelerate and incentivise councils and local NHS organisations to jointly plan and deliver services.

Resolved to note the final version of the Derby City Better Care Fund plan that was approved by the Board at its meeting on 13 March 2014.

73/13 Director of Public Health Annual Report 2014

The Board was asked to consider the Director of Public Health Annual Report 2014. The Director of Public Health is required, under the Health and Social Care Act 2012, to prepare an annual report on the health of the people in the area of the local authority. The authority must publish the report.

Resolved to receive and note this report.

74/13 Health and Wellbeing Board Forward Plan 2014

The Board were provided with a copy of the forward plan.

Resolved to note the forward plan.

MINUTES END