

Time commenced: 1.04pm
Time finished: 2.24pm

Health and Wellbeing Board 11 September 2014

Present

Chair: Dr Shelia Newport (for 15/14 to 24/14 inclusive)
Councillor Banwait (for 25/14 to 30/14 inclusive)

Councillor Banwait arrived during consideration of 24/14 and was present for 25/14 to 30/14 inclusive.

Elected members: Councillors Hussain, Repton, Skelton, Williams and Wright

Councillor Skelton arrived during consideration of 24/14 and was present for 25/14 to 30/14 inclusive.

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

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

Co-optees of other organisations: Doug Black (NHS Commissioning Board Local Area Team), Dr Paula Crick (University of Derby), Steve Trenchard (Derbyshire Health Foundation Trust), Steve Studham (Derby Healthwatch),

Substitutes: Hardyal Dhindsa (Derbyshire Police and Crime Commissioner for Alan Charles), Mike Garner (Children and Young People Network) for Dionne Reid), Steve McLernon (Derbyshire Fire and Rescue Service for Terry McDermott)

Non board members in attendance: Frank McGhee

15/14 Apologies

Apologies for absence were received from Councillor Webb, Tracy Allen (Derbyshire Community Healthcare Services), Alan Charles (Derbyshire Police and Crime Commissioner), Sue James (Derby Hospitals NHS Foundation Trust) and Terry McDermott (Derbyshire Fire and Rescue Service).

16/14 Late items to be introduced by the Chair

There were no late items.

17/14 Declarations of Interest

There were no declarations.

18/14 Minutes of the meeting held on 17 July 2014

The minutes were agreed as a correct record subject to the following amendment:

Minute 05/14 Health and Wellbeing Strategy

Resolved to agree that the Constitutional Services Officer will investigate the relationship between Derby City Council's Adults and Public Health Board and the Health and Wellbeing Board.

Items Requiring Decisions by the Board

19/14 Foundation Trust Quality Reports

The Board received a report of the Director of Public Health on Foundation Trust Quality Reports.

It was reported that the current process for reviewing and commenting on annual quality audit reports submitted by NHS Foundation Trust's to the Health and Wellbeing Board was not robust or well established. It was further reported that from April 2013 all NHS Foundation Trusts had been required by the regulator Monitor to send an annual quality account to Health and Wellbeing Boards for their consideration and comment.

Members noted that currently the Board had no process in place to manage this and that this year, as a consequence of the timing, the Board were unable to provide a formal comment. It was therefore proposed that the following process be established:

- In January/February Foundation Trusts provide the Board with an overview of what they are planning to review within their quality audit.
- The Director of Public Health/ Public Health Clinical Governance Lead prepares a response for consideration and approval of the Board.
- Where timescales mean a consultation response is required between Board meetings, the Director of Public Health/ Public Health Clinical Governance Lead is delegated responsibility of preparing a response on behalf of the Board.
- Published Quality reports are provided to the Board for information.

Resolved:

- 1. to note the report; and**
- 2. to approve the process outlined in 1.4 including delegating responsibility to the Director of Public Health/ Public Health Clinical Governance Lead when timescales necessitate.**

20/14 Collaborative Commissioning in Southern Derbyshire

The Board received a joint report of the Chief Officer, Southern Derbyshire Clinical Commissioning Group (CCG) and the Strategic Director for Adults, Health and Housing on Collaborative Commissioning in Southern Derbyshire.

It was reported that Derby's Health and Wellbeing Board had agreed a draft vision for the future of services in Southern Derbyshire. It was further reported that this was set out in the Better Care Fund submission and had been endorsed by the Southern Derbyshire Leadership Group (which included commissioners and providers working within the Southern Derbyshire geography).

Members noted that although originally focussed on meeting the needs of the frail and elderly population, it was now intended to cover all aspects of care, including health and social care, physical and mental health, adult and children's services, and planned and unplanned care.

It was reported that developing community-based services was crucial to delivering the strategic aims of health and social care and would also help define the future role of both secondary care and general practice.

Members endorsed the approach but expressed the need to set clear timescales. Concerns were raised by Members in relation to potential legal issues of such an approach. The Chief Officer, Southern Derbyshire CCG expressed confidence that the approach was appropriate and legal having sought relevant guidance and legal advice. It was agreed, however, that serious consideration should continue to be given to the legal aspects and the overall detail. Members discussed the potential conflict in the system of providers being asked to both collaborate and compete. Members also discussed the potential for the approach to lead to pooled budgets in the future.

Resolved:

- 1. to support the Collaborative Commissioning initiative and the direction of travel set out in the Statement of Intent;**
- 2. to recognise the need for a leadership development programme across all the organisations involved in order to develop a shared understanding of the implications of the initiative and the behavioural changes that need to be encouraged;**
- 3. to agree that the Chief Operating Officer, Southern Derbyshire CCG is to prepare an implementation timetable; and**
- 4. to receive regular reports on progress at the Health and Wellbeing Board.**

21/14 Pharmaceutical Needs Assessment

The Board received a report of the Director of Public Health on Pharmaceutical Needs Assessment.

It was reported that the Health and Social Care Act 2012 transferred the responsibility for developing and updating Pharmaceutical Needs Assessments (PNAs) from Primary Care Trusts to Health and Wellbeing Boards. It was further

reported that the production of a PNA became the responsibility of Derby Health and Wellbeing Board from 1 April 2013.

Members noted that in accordance with regulations, each Health and Wellbeing Board must:

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

It was reported that the development of a PNA was a separate duty to that of developing a Joint Strategic Needs Assessment as PNAs would inform commissioning decisions by local authorities (public health services from community pharmacies) and by NHS England and clinical commissioning groups.

It was further reported that it was intended that a cross-county PNA be produced, overseen by the established Derbyshire and Derby City Pharmaceutical Needs Assessment Steering Group (membership of which included the Chair of the Local Professional Network (LPN) for Pharmacy, which provided an important safeguard), which would include a discrete city component and would meet the minimum requirements of The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013.

Resolved:

- 1. to note its responsibility to develop a Pharmaceutical Needs Assessment (PNA) by 1 April 2015;**
- 2. to agree to the production of a joint/aligned PNA covering both city and county overseen by the Derbyshire and Derby City Pharmaceutical Needs Assessment Steering Group; and**
- 3. to receive future updates and assurances as to the progress in developing a PNA covering the Derby Health and Wellbeing Board.**

22/14 Better Care Fund Update

The Board received a joint report of the Strategic Director of Adults, Health and Housing and the Chief Officer of Southern Derbyshire Clinical Commissioning Group on Better Care Fund Update.

It was reported that in June 2013, Ministers announced the creation of an integrated transformation fund (which was renamed the Better Care Fund) to create £3.8bn worth of pooled budgets nationally between health and social care, starting from April 2015. It was further reported that the aim of the fund was to accelerate and incentivise councils and local NHS organisations to jointly plan and deliver services so that integrated care becomes the norm by 2018.

Members noted that an additional £1.153m had been made available locally in 2014/15 in the pool for the transfer from health to social care to streamline this process and that the Better Care Fund value for Derby City was £17.403m. Members

asked how the £17.403m was determined. It was confirmed that this had been determined at a national level.

The report updated Members of the Health and Well Being Board of the revised requirements for the Better Care Fund, which were published at the end of July 2014. Members noted the increase in importance of the emergency admission metric and minimum reduction of 3.5%. It was reported that this would now be performance related and may require re-profiling of the financial assumptions.

Members were asked to delegate authority to approve the revised Better Care Fund plan final submission to the Chair of the Health and Wellbeing Board, the Chair of the Southern Derbyshire Clinical Commissioning Group and the Cabinet Member for Adults and Health.

Resolved to delegate authority to approve the final version of the Derby City Better Care Fund plan to the Chair of the Health and Wellbeing Board, the Chair of the Southern Derbyshire Clinical Commissioning Group and the Cabinet Member for Adults and Health.

23/14 Implications of the Care Act 2014

The Board received a report of the Strategic Director of Adults, Health and Housing on Preparing for Implementation of the Care Act 2014.

It was reported that the Care Act 2014 was the most significant reform of social care legislation in more than 60 years, putting people and their carers in control of their care and support. It was further reported that the Care Act had created a single, modern law that made it clear what kind of social care people should expect.

Members noted that the Care Act reformed the law relating to social care and support for adults and carers, safeguarding and care standards and that it also promoted the integration of care and support with health services. It was reported that it had taken into account the findings of the Dilnot Commission's Report into the funding of care and support, and the Francis Inquiry into failings at the Mid Staffordshire NHS Foundation Trust.

It was further reported that there was a commitment to form a common view jointly across the Association of Directors of Adult Social Services/Department of Health/Local Government Association of the national and local costs of implementing the Care Act reforms to enable planning to take place. Members noted that two financial models – the Surrey Model and the Lincolnshire Model - had been developed for use and were currently being reviewed by an independent social care expert from the London School of Economics.

It was reported that Derby City Council had run both the Surrey Model and the Lincolnshire Model to establish the cost parameters for implementing the Care Act reforms. Members noted that the modelling suggested a shortfall in the finances received compared to the likely cost.

Members recognised that the challenges and risks being faced were very great indeed.

Resolved:

- 1. to note the requirements of the Care Act 2014;**
- 2. to note the significant additional financial and operational impacts as a result of the Care Act; and**
- 3. to receive an update at a future meeting of the Health and Wellbeing Board.**

24/14 Mental Health Crisis Care Concordat

The Board received a report of the Office of the Police & Crime Commissioner for Derbyshire on Mental Health crisis Care Concordat.

Members noted that the report provided an overview of the Mental Health Crisis Care Concordat, launched in February 2014 jointly by the Department of Health, Home Office and Deputy Prime Minister's Office.

It was reported that this was a national approach but with a local implementation plan. Members were informed of the work being undertaken within the Office of the Police and Crime Commissioner for Derbyshire around Mental Health.

Support was sought from the Board for the approach that had been adopted locally for the sign up and roll-out of the Concordat.

Resolved:

- 1. to note the report;**
- 2. to note and support the development of a multiagency group and its work, and the Mental Health Summit; and**
- 3. to support a coordinated local approach via the two Health and Wellbeing Boards and to support the development and implementation of the local action plan.**

Items for Information

25/14 Derby City Dementia Strategy 2014-2016

The Board received a joint report of the Strategic Director of Adults, Health and Housing and the Chief Officer of Southern Derbyshire Clinical Commissioning Group (CCG) on Derby City Dementia Strategy 2014 - 2016.

It was reported that Derby City Council and Southern Derbyshire CCG had refreshed the Derby City Dementia Strategy (2014-2016) and that the strategy was developed following wide-scale engagement with people affected by dementia including families

and carers. It was further reported that the strategy contained an action plan that mirrored the broad range of outcomes within the National Dementia Strategy (2009).

Members noted that the Strategy and associated implementation plan was being overseen by the partnership Southern Derbyshire Dementia Implementation Group, which in turn reported to the Integrated Care Implementation Group (part of the partnership Integrated Care Programme).

The Strategic Director encouraged all Members to take part in the Dementia Friends initiative, through the Alzheimer's Society.

Resolved to note the Derby Dementia Strategy and implementation plan for 2014 – 2016.

26/14 Integrated Commissioning for Children and Young People Family Health Services – Progress Report

The Board received a report of the Director of Commissioning on Integrated Commissioning for Children and Young People Family Health services – Progress Report.

Members noted that the report provided a summary of the progress on key children, young people and family priorities which had been developed from the Health and Well-being Strategy – everyone's business, the NHS Outcomes Framework (2013/14), the Public Health Outcomes Framework (2013 to 2016) and the Derby Children and Young People's Plan (2014/15).

It was reported that these strategic commissioning intentions were developed in discussions with key commissioners across the health economy in Derby and that this approach had resulted in support for an integrated commissioning approach to delivering better health outcomes. Members noted that this 'whole-systems' approach acknowledged that patients do not see distinctions between services, want ease of access and early help.

Resolved:

- 1. to note the progress which has been made over the last six months on this integrated commissioning approach;**
- 2. to note the indicative timeline and key activities over the next eighteen months; and**
- 3. to encourage all partners and providers to continue to engage with this integrated approach and to take the opportunity to respond to key intentions during the next eighteen months.**

27/14 Health Protection Board Update

The Board received a report of the Director of Public Health on Health Protection Board Update.

It was reported that the Derbyshire Health Protection Board met on 21 July 2014 and that the report provided the Health and Wellbeing Board with an overview of the key issues discussed.

Resolved to note the report.

28/14 Health and Wellbeing Strategy Update

The Board received a report of the Director of Public health on Health and Wellbeing Strategy Update.

It was reported that at the previous Health and Wellbeing Board held on 17 July 2014, broad structure and content of the Health and Wellbeing Strategy 2014-16 was agreed. It was further reported that at that meeting it was also agreed that Board Members and their respective organisations were to own and influence the strategy and ensure alignment with their own strategies. Members noted that it had been agreed that Board Members nominate appropriate individuals to attend a Health and Wellbeing Strategy development workshop. It was reported that this workshop was planned for late September (availability permitting).

The Chair proposed that the Health and Wellbeing Strategy should have a focus on encouraging healthy eating and tackling obesity. Members discussed various related issues including free school meals, links with mental health problems and the pre-disposition to obesity of certain ethnic groups. It was agreed that a holistic system-wide approach should be taken in tackling the issue.

It was agreed that a further report should be brought back to the November 2014 meeting of the Board.

Resolved:

- 1. to note the report;**
- 2. to agree that the Strategy should have a focus on encouraging healthy eating and tackling obesity; and**
- 3. to request that a further report be brought to the November 2014 meeting of the Health and Wellbeing Board.**

29/14 Healthwatch Derby – Hospital Discharge Report and NHS Foundation Trust Response

The Board received a report of the Chair, Healthwatch Derby on Healthwatch Derby Hospital Discharge Report and NHS Foundation Trust Response.

It was reported that this study was the third in a series examining the experiences of health care professionals at residential and nursing homes, regarding the process of a patient's discharge from hospital to a care home in terms of appropriate discharge, medication, awareness, involvement and support, information and communication.

Members considered the findings of the report.

Resolved to note the report and its findings.

30/14 Healthwatch Derby – Report on Cancer Services and NHS Foundation Trust Response

The Board received a report of the Chair, Healthwatch Derby on Healthwatch Derby – Report on Cancer Services and NHS Foundation Trust Response.

It was reported that the consultation was organised by Healthwatch Derby to undertake an independent assessment of patient experiences around cancer services. Members noted that the report highlighted the various ways in which patient feedback was captured. It was reported that the survey was designed with the help of Annabel's Angels, a local charity supporting people with cancer. It was further reported that it was essential that a wide range of interactive platforms were available for patients, carers, seldom heard service users, staff and volunteers at the hospital to be able to fully express their views about the service received, and improvements required.

Resolved to note the report and its findings.

MINUTES END