# Health and Wellbeing Board 12 March 2015

## Present

**Chair:** Councillor Repton was appointed Chair for the meeting in the absence of the Chair and the Vice Chair.

Elected members: Councillors Hussain, Repton, Skelton and Webb.

**Appointed officers of Derby City Council:** Cath Roff and Frank McGhee as substitute for Andrew Bunyan.

Appointed representatives of Southern Derbyshire Clinical Commissioning Group: Andy Layzell.

**Appointees of other organisations**: Paula Crick (University of Derby), Sarah Edwards (CYPN), and Steve Studham (Derby Healthwatch) Kath Cawdell (Community Action), Steve Trenchard (Derbyshire Health Foundation Trust).

**Substitutes**: Ken Deacon (for Doug Black NHS Commissioning Board) Steve McLernon (for Terry McDermott Derbyshire Fire and Rescue Service)

**Non board members in attendance:** T Clegg (Derby City Council), A Wynn (Derby City Council), Hamira Sultan, Julie Theaker and Sandra Whiston.

## 49/14 Apologies

Apologies for absence were received from Councillors Banwait, and Wright, Sue James (Derby Hospitals NHS Foundation Trust) and Sheila Newport (Southern Derbyshire Clinical Commissioning Group, Tracy Allen (Derbyshire Community Healthcare Services), Terry McDermott (Derbyshire Fire and Rescue Service).

# 50/14 Late items to be introduced by the Chair

There were no late items.

## 51/14 Declarations of Interest

There were no declarations.

# 52/14 Minutes of the meeting held on 15 January 2015

The minutes were agreed as a correct record.

# 53/14 Health and Social Care 5 Year Transformation Plan

A presentation accompanied the report which was entitled Health and Social Care 5 Year Transformation Plan. This was presented to the Board by the Strategic Director of Adults, Health & Housing and the Chief Officer, Southern Derbyshire Clinical Commissioning Group who stated that health and social care partners had participated in a system-wide review to define the priorities for transformation that will ensure a long term sustainable health and social care system.

Extensive benchmarking analysis had been undertaken, as had a number of one-toone interviews and workshops with leaders and front line staff, clinicians and middle management. The governance for overseeing the transformation had also been reviewed to ensure it was fit for purpose.

The report concluded that the current system of health and social care was unsustainable both in financial terms and outcomes for citizens. A transformation plan was required to engineer service change to meet the future needs of our population whilst achieving financial balance.

#### **Resolved to:**

- 1) Note the report.
- 2) Endorse the Health and Social Care 5 Year Transformation Plan.
- 3) Receive regular updates on progress made.

# 54/14 Oral Health for Children and Young People in Derby

A Report of the Director of Public Health was presented to the Board by the Derby City Council Consultant in Public Health. The report - Oral Health for Children and Young People in Derby informed the Board that poor oral health had the potential to cause significant levels of pain in children due to them having decayed teeth and/ or infections and poor oral health was also closely linked to deprivation.

The Smile 4 Life pilot (report attached in Appendix 2), which had been commissioned by Public Health Derby City Council, had identified high levels of poor oral health in six Derby Primary Schools in nursery (3-4 years) and reception (4-5 years) children who had participated in the pilot. On average, the children in this pilot had nearly three times higher levels of poor oral health compared to England as a whole. Also nearly half of the children in the pilot who were identified as having poor oral health did not have a dentist. Poor oral health is a potential indicator for vulnerability and neglect.

The report went on to highlight that some parents had reported difficulties in accessing a dentist for their child. The Derbyshire and Nottinghamshire Area Team (NHS England) had responded to this by making more funding available to local dentists so they could provide more care for patients.

Members of the Board discussed the need to educate children on how to brush their teeth effectively and ways in which this training could be delivered, through schools and health visitors.

Resolved to note the levels of dental decay identified by the pilot project and the potential unmet oral health needs for young children in Derby.

# 55/14 Department of Health Self Assessments for Learning Disabilities and Autism

A report of the Strategic Director of Adults, Health & Housing was considered by the Board. The report - Department of Health Self Assessments provided the Board with an update on progress within Learning Disability and Autism provision reported at February 2014 Board and on the outcomes of the subsequent 2014/15 Joint Health and Social Care Learning Disability and Autism Self Assessments (SAFs).

Members discussed the report and the stages the various actions were at which were highlighted as being either red, amber or green. It was noticed that "Health Action Plans" on page 2 of Appendix 2, were showing as being at red.

## Resolved to:

- 1) Note the effective partnership work undertaken by Derby City Adults, Health and Housing and Hardwick Clinical Commissioning Group and Derbyshire County Council Adult Social Care.
- 2) Accept and agree the priorities for development in 2015/16 detailed in the report.
- Note the resource implications of the actions necessary to implement the improvements to the lives of people with autism and learning difficulties.
- 4) Recommend that the topic of Health Action Plans be referred to the relevant Overview and Scrutiny Board for in depth investigation.

# 56/14 Pharmaceutical Needs Assessment update

A report of the Director of Public Health was received by the Board; The Health and Social Care Act 2012 outlined that the responsibility for developing and updating Pharmaceutical Needs Assessments (PNAs) had transferred from Primary Care Trusts (PCTs) to Health and Wellbeing Boards (HWBs). The production of a PNA became the responsibility of Derby Health and Wellbeing Board from 1 April 2013.

The report stated that in accordance with regulations, each Health and Well-being Board must:

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

As approved at the Health and Wellbeing Board held on 11 September 2014, a draft PNA has been produced covering both Derby City and Derbyshire County (PNA and associated documents can be found here:

<u>http://www.derbyshire.gov.uk/pharmacyservices</u>). The draft document was required to be consulted on for a minimum of 60 days. The PNA was currently out for consultation (the link to the consultation has previously been circulated to Board members). The consultation closed on the 17 March 2015.

The draft document incorporated the minimum information requirements. It provided information on:

- Overview of current provision.
- Overview of findings of public consultation.
- Profile of Derby.
- Profile of Derbyshire and constituent localities.

The draft PNA concluded that the current provision of pharmaceutical services in the city and county meet the identified population needs. The HWB is required to produce and publish the PNA by 1 April 2015. The PNA would be reviewed in 2018 unless there were significant changes to local need or provision.

#### **Resolved to:**

- 1) Note a draft Pharmaceutical Needs Assessment had been produced and was currently out for consultation.
- 2) Due to the Health and Wellbeing Board needing to publish its first Pharmaceutical Needs Assessment by 1 April 2015 the Board agreed to delegate responsibility to Board members – the Director of Public Health, the Clinical Commissioning Group representative and Chair to approve a final version of the PNA for publication.

## 57/14 Health and Wellbeing Strategy Update

The Board were presented with a report of the Director of Public Health on Health and Wellbeing Update.

The Board had approved the draft Health and Wellbeing Strategy at its meeting held on 13 November 2014. The draft Health and Wellbeing Strategy 2014-19 has been out for a period of public consultation. The consultation ended on 20 February 2015.

The draft Health and Wellbeing Strategy 2014-19 will be updated taking account of feedback from the consultation.

The revised Strategy had to be taken to representatives of the Diversity Forums in the city before an Equalities Impact Assessment was carried out. A final version of the Health and Wellbeing Strategy would then be drafted and would be circulated to Board members for final comment with a view to final publication of the Health and Wellbeing Strategy by the end of March 2015.

## **Resolved to:**

- 1) Agree to receive an updated version of the Health and Wellbeing Strategy to provide final comment prior to publication.
- 2) Delegate responsibility to the Chair of the Health and Wellbeing Board to approve the final version of the Health and Wellbeing Strategy for publication.

# 58/14 Commissioning Children's Health Services Update

A report of the Strategic Director of Children and Young People was presented to the Board on Commissioning Children's Health Services.

The report updated the Health and Wellbeing Board on the changes in commissioning arrangements and the current thinking on the next phase of transformation of children's health services, these changes were outlined in the report and supported the direction of travel toward further integration of commissioning and transformation across the Local Authority and Southern Derbyshire CCG.

## **Resolved to:**

- 1) Note the changes and support a more collaborative approach going forward.
- 2) Agreed to move one integrated commissioning board to the South Unit of Planning.
- 3) To further develop a joint approach on agreed issues with Derbyshire County Council and the North Unit of Planning.

# 59/14 Terms of Reference Update

A report of the Health and Wellbeing Board Chair was presented to the Board which updated the Terms of Reference used by the Health and Wellbeing Board. It had been previously agreed that the Terms of Reference would be reviewed annually.

The Terms of Reference covered four key sections:

- Purpose and function
- Membership
- Governance and reporting
- Meeting management.

The report stated that due to the General Election on 7 May 2015 the role and responsibilities of the Health and Wellbeing Board may change.

## **Resolved to:**

- 1) Review and agree the amended Terms of Reference subject to an additional amendment Voluntary Sector, Children and Young People Network (Derby CIC).
- 2) Review and update the Terms of Reference as required in July 2015.

# 60/14 Health and Wellbeing Board Development Workshop Update

The Board received a report of the Dean, College of Health and Social Care and Director of Public Health – Health and Wellbeing Board Development Workshop Update which stated on 15 January 2015 the Health and Wellbeing Board (HWB) held a development workshop to review how it is functioning, its role and responsibilities. The workshop was facilitated by Satvinder Rana, Programme Manager, Local Government Association (LGA).

The Board debated a wide range of issues. A short paper which summarised the discussions was included with this report. A number of positive aspects of the HWB were identified during the workshop in relation to:

- Positive relationships
- Continuity and commitment of membership
- Shared sense of purpose.

#### **Resolved to:**

- 1) Note the positive aspects of the Health and Wellbeing Board.
- 2) Note the areas for further consideration and development.
- 3) Agree a programme of "Challenge and Development Workshops" for Health and Wellbeing Board members.

## 61/14 Better Care Fund Plan

A joint report of the Strategic Director of Adults Health and Housing and the Chief Operating Officer of Southern Derbyshire Clinical Commissioning Group was presented to the Board – Better Care Fund Plan (BCF). The report outlined that each Health and Wellbeing Board (HWB) had to submit a plan to support integrated working across health and social care services. A pooled fund was created to support the delivery of the BCF plan. The valueof this for Derby was £17.403m.

The Board had previously approved the plan submitted to NHS England for assessment and endorsement which had been endorsed in and notified the Council and Southern Derbyshire CCG on 6 February 2015. The governance arrangements

were set out in the plan and detailed within the report at paragraphs 4.8 to 4.12 inclusive.

The Board were asked to note an amendment to the report at Implications 1.1 the "risk of 3.5%" should actually read 3.4%.

## **Resolved to:**

- 1) Approve the proposed governance arrangements in place to deliver the Better Care Fund plan.
- 2) To approve the Better Care Fund plan as endorsed by NHS England.

# 62/14 Healthwatch Derby Think Healthy Report, Recommendations and Responses

A report was presented to the Board – Healthwatch Derby Think Healthy Report, Recommendations and Responses. The report stated that working in partnership with Derbyshire Healthcare Foundation NHS Care Trust (DHFCT) Healthwatch Derby had structured a comprehensive consultation programme to assess the impact and effectiveness of services provided by the Trust.

The report further stated that over twenty meetings had taken place during the period of May 2014 to November 2014 to give shape to the consultation, its implementation and execution, feedback gathering, research, analysis and reporting.

A good level of feedback had been achieved:

- 1070 items of feedback
- Generic Workshops produced 215 items of feedback
- Socho Sehat specialised workshop produced 145 items of feedback
- Outreach produced 410 items of feedback
- Think Healthy survey produced 116 responses, 31 of which were on Easy Read Format.

A member requested that factual evidence be brought back to the Board surrounding the first of three key areas "1. The experience of restrictive practices" could be found at page 58, Chapter 5 of the Think Healthy report.

#### **Resolved to:**

- 1) Note the report, its findings and recommendations.
- 2) Receive a report at a future meeting which would present factual evidence of the "Experience of Restrictive Practices".

MINUTES END