

# M MINUTES

meeting: **HEALTH AND WELLBEING BOARD**

date: **1 MAY 2013**

## **PRESENT:-**

- |   |   |   |
|---|---|---|
| M Bygrave                                 | - | Chair, Wolverhampton Healthwatch  |
| Councillor S Constable                    | - | Cabinet Member for Children and Families  |
| Ch. Suptd. N Evans                        | - | West Midlands Police  |
| Councillor S W Evans                      | - | Cabinet Member for Adult Services   |
| K J Helliwell (substitute for L Williams) | - | NHS England Area Team   |
| Dr H Hibbs<br>Clinical                    | - | Chief Officer, NHS Wolverhampton Clinical Commissioning Group                               |
| R Jervis                                  | - | Director for Public Health, Community Directorate   |
| K Jones (substitute for T Johnson)        | - | Assistant Director, Partnerships, Economy and Culture, Education and Enterprise Directorate |
| R M Jones                                 | - | West Midlands Police and Crime Commissioner   |
| S Norman                                  | - | Strategic Director for Community  |
| Councillor Mrs S Samuels                  | - | Cabinet Member for Health and Wellbeing   |
| Councillor P Singh                        | - | Shadow Cabinet Member for Health and Wellbeing  |
| R Young                                   | - | Director of Strategy and Solutions, NHS Wolverhampton Clinical Commissioning Group          |

## **BY INVITATION:-**

- |           |   |   |
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| Dr J Odum | - | Medical Director, Royal Wolverhampton NHS Trust |
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## **IN ATTENDANCE:-**

- |            |   |  |
|------------|---|--|
| V Griffin  | - | Assistant Director, Health, Well Being and Disability, Community Directorate |
| C W Craney | - | Democratic Support Officer, Central Services Division, Delivery Directorate  |

**Wolverhampton**  
City Council



**Part I Open Items**  
**(Open to Press and Public)**

**Election of Chair**

It was proposed by Councillor S W Evans, seconded by Councillor P Singh and

- 1 Resolved:  
That Councillor Mrs S Samuels be appointed Chair of the Health and Wellbeing Board for the 2013/14 Municipal Year.

**Chair's Announcement**

- 2 The Chair, Councillor Mrs S Samuels, welcomed Members and Officers to this, the inaugural meeting, of the Health and Wellbeing Board.

**Apologies for Absence**

- 3 Apologies for absence had been received from Professor L Lang (University of Wolverhampton), T Johnson, Strategic Director Education and Enterprise (designate) and L Williams (NHS England Area Team).

**Introductions**

- 4 The Chair, Councillor Mrs S Samuels, invited Members and Officers to introduce themselves given that this was the first meeting that some Members had attended under the revised structure. Introductions were duly made.

**Notifications of Substitutes**

- 5 K Helliwell, Director of Commissioning, NHS England Area Team, attended the meeting on behalf of L Williams and K Jones, Assistant Director, Partnerships, Economy and Culture, Education and Enterprise Directorate, attended the meeting on behalf of T Johnson, Strategic Director designate, Education and Enterprise. (designate)

**Notification of Declarations of Interest**

- 6 No declarations of interest were made in relation to items under consideration at the meeting.

**Minutes**

- 7 Resolved:  
That the minutes of the meeting of the Shadow Health and Well Being Board held on 6 March 2013 be confirmed as a correct record and signed by the Chair.

**Matters Arising (Appendix 1)**

V Griffin, Assistant Director, Health, Wellbeing and Disability, Community Directorate, presented a report which informed the Board of the current position with a variety of matters considered at previous meetings of the Shadow Health and Well Being Board.

- 8 Resolved:  
That the report be received and noted.

**Updated Terms of Reference (Appendix 2)**

- 9 Resolved:
- (i) That the report be received and noted subject to the undermentioned amendments:
- the deletion of the reference to “National Health Service Commissioning Board and National Health Service Local Area Team” and the substitution therefor of “NHS England – Area Team”, the deletion of “Wolverhampton Commissioning Consortium” and the substitution therefor of “NHS Wolverhampton Clinical Commissioning Group” and to the deletion of the reference to “Public Health Board” in sub paragraph (g) of paragraph 19.5 and the substitution therefor of “Public Health Delivery Board” and in sub paragraph (m) of paragraph 19.5 of the addition of “Joint Strategic Needs Assessment immediately prior to “Health and Wellbeing Strategy”.

**Health and Wellbeing Board Forward Plan (Appendix 2)**

V Griffin presented a report which contained a draft Forward Plan of the 2013/14 Municipal Year for the Health and Wellbeing Board. She commented that the Forward Plan contained indicative dates for reports to be submitted to future meetings which could be revised, if required, by contacting C W Craney, Democratic Support Officer, Delivery Directorate.

R M Jones, West Midlands Police and Crime Commissioner, suggested that it would be helpful, given the varying dates and times of commencement of meetings of the Board, if these were included within the Forward Plan. The Chair, Councillor Mrs S Samuels, reminded the Board that the patterns of times of commencements were being replicated and alternating between 1230 hours and 1400 hours as had been the pattern with the Shadow Board.

R Young, Director of Strategy and Solutions, NHS Wolverhampton Clinical Commissioning Group, advised that it was intended that submit reports in connection with the City Clinical Commissioning Group commissioning intentions would be submitted to meetings of the Board in November 2013 and January 2014.

- 10 Resolved:  
That the report be received and noted and that future iterations include the time of commencement of meetings of the Board and reference to reports in connection with the City Clinical Commissioning

Group commissioning intentions being submitted to the 6 November 2013 meeting and 8 January 2014 meeting.

### **Future Health and Wellbeing Board Development/Focus Days**

V Griffin presented a report in relation to proposed future Focus / Development Away Days. She invited the Board to consider whether it wished to continue the practice of Wellbeing Focus / Development Away Days.

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Resolved:

(i) That the principal of future Focus / Development Away Days be confirmed;

(ii) That the next Development Day be in respect of formulating a response to the Francis Report in relation to the Mid Staffordshire Hospital NHS Trust and the draft agenda detailed at Appendix 1 to the report be approved;

(iii) That the partners to be involved in the day as detailed in Appendix 1 to the report be confirmed including the invitation to be extended to two nominees from Wolverhampton Healthwatch in addition to the Chair of Healthwatch (as a Member of the Board).

### **Progress on the Key Priorities from the Health and Wellbeing Strategy**

- **Alcohol and Cardio Vascular Disease**

R Jervis presented a report which updated the Board in relation to the current status of work in respect of two of the key targets within the Joint Strategic Needs Assessment and the draft Joint Health and Wellbeing Strategy, namely, alcohol and cardio vascular disease. She assured the Board that these key targets would not be deleted from future consideration but subsumed into other work streams under the latest iteration of the Health and Wellbeing Strategy.

Councillor Paul Singh referred to Intervention No. 4 in respect of cardio vascular disease mortality and requested further information in relation to the workplace health initiative. He enquired as to whether this would require local employers to undertake health checks on their employees. R Jervis confirmed that this was a national initiative and indeed a mandated function which would be commissioned through the Royal Wolverhampton NHS Trust. Dr H Hibbs, Chief Officer, NHS Wolverhampton Clinical Commissioning Group, suggested that to move this matter forward it would be necessary to enlist the support of private employers to offer the opportunity of health checks for their employees.

R M Jones referred to the interventions in respect of alcohol related admissions and mortality and commented on the positive progress made nationally especially in relation to the minimum unit pricing albeit that this was unlikely to be included in legislation currently promoted by the Government. He referred to a number of interesting models using licensing regulations and persuasion measures and

suggested that these should be considered further by the Board. Councillor S W Evans suggested that issues such as minimum unit pricing was an emotive subject and that any interventions by the Council might not be supported by all Councillors prior to the results of pilot studies being examined.

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Resolved:

(i) That the report in respect of progress on the key priorities in relation to alcohol and cardio vascular disease be received and noted;

(ii) That the Officers be requested to initiate discussions with local employers with a view to moving forward on health checks being offered to employees;

(iii) That the Director of Public Health be requested to liaise with R M Jones, West Midlands Police and Crime Commissioner, with regard to the Oldham, Ipswich and Northampton models in respect of alcohol consumption and report thereon to a future meeting.

- **Child Poverty**

K Jones, Assistant Director, Partnerships, Economy and Promotions, Education and Enterprise Directorate, presented a report which presented an overview on the progress of the revision of Wolverhampton's Child Poverty Strategy, focussing on a number of principles and draft outcomes under each building block. She advised that the purpose of the report was to seek feedback on principles and draft outcomes which would influence priority SMART (Specific Measurable Achievable Realistic Timely) actions, which would become the Implementation Plan for the revised Child Poverty Strategy and Children and Young People's Plan.

The Chair, Councillor Mrs S Samuels, enquired as to the timelines for the delivery of the draft outcomes. K Jones advised that these had yet to be identified. Councillor P Singh referred to paragraph 3.3 of the report insofar as it related to targeting and delivery being focussed on six Wards and groups most vulnerable to child poverty and welfare reform and questioned as to whether these Wards had yet been identified. K Jones responded that the six target Wards had yet to be identified but that this information could be contained in a future report to the Board. Councillor S W Evans suggested that evidence based information was required inasmuch as some Wards would stand out statistically but this would not necessarily reflect the true picture. M Bygrave, Chair, Wolverhampton Healthwatch, referred to paragraph 3.3 of the report insofar as it related to the stakeholder workshop held on 14 January 2013 and enquired as to the identities of stakeholders / organisations invited to the Stakeholder Workshop.

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Resolved:

(i) That the report be received and noted;

(ii) That a further report in relation to timelines, the six target Wards and the membership of the Stakeholder Workshop be submitted to the next meeting of the Board

**Draft Health and Wellbeing Strategy – Update on the Work of the Task and Finish Group**

V Griffin presented a report on the work undertaken by the Task and Finish Group. The Task and Finish Group had focussed on two specific areas:

- the top five priorities of the Health and Wellbeing Board
- the priorities of the three Sub Groups of the Health and Wellbeing Board together with the operational requirements under the new legislative requirements and operating principles of the Health and Wellbeing Board.

A Venn diagram was appended to the report which detailed the 14 Health and Wellbeing outcome briefings to be addressed.

She drew to the attention of the Board the five priorities which had been identified and the interrelationship with Health and Wellbeing Board outcomes together with the topics and priorities for the three Sub Groups, the use which could be made of Development / Focus Away Days by the Board to advance its work and also the work undertaken to date in relation to the production of the Joint Strategic Needs Assessment (JSNA) Mark 2 including the need to identify project support/sponsors.

R Jervis reminded the Board that the production of the JSNA had been undertaken via a clear process using the four key outlook frameworks and the Task and Finish Group had used these priorities to consider how the outcomes could be delivered.

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Resolved:

(i) That the priorities outlined in section 2 and as agreed at the Shadow Health and Wellbeing Board Away Day held on 10 April 2013 be endorsed;

(ii) That the three proposed operational priorities as outlined in section 4 of the report which would be the subject of future focussed Away Days be endorsed;

(iii) That the additional priority for the Adults Delivery Board on “wellbeing” outlined in section 3 of the report be endorsed;

(iv) That the progress on the production of the JSNA Mark 2 be noted together with the undertaking to deliver further reports on this matter;

(v) That the “dementia” priority tasked to the Adults Delivery Board be amended to include “early diagnosis”.

**NHS Wolverhampton Clinical Commissioning Group – Integrated Commissioning Plan (Appendix 2)**

R Young, Director of Strategy and Solutions, presented a report which advised the Board of progress against the requirements to develop and submit an Integrated Commissioning Plan (ICP) to the NHS England Area Team as mandated by the Department of Health and presented an Executive Summary of the ICP. He reminded the Board that the production of the ICP was an integral part of the authorisation process for the Clinical Commissioning Group and that the final report would be considered at a meeting of the CCG Board in approximately two weeks, at which time it would be available for inspection on the CCG web site. He commented that there was much synergy and crossover between the ICP and JSNA and that the CCG were fully aware of the need for communication and engagement work with patients on commissioning matters. He reported that the CCG were also seeking to support the Black Country Partnership NHS Foundation Trust and the Royal Wolverhampton NHS Trust in relation to commissioning issues.

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Resolved:

That the report be received and noted and that a further report on this matter be submitted to the next meeting of the Board.

**Development of a Joint Urgent Care Strategy for Wolverhampton City (Appendix 3)**

Dr J Odum, Medical Director, Royal Wolverhampton NHS Trust, presented a report of the Joint Urgent and Emergency Care Strategy Board in connection with the development of a Joint Urgent Care Strategy for Wolverhampton City. The report set out the future vision for urgent and emergency care for patients using services in Wolverhampton and the development of strategic options. He advised the Board that the Joint Urgent and Emergency Care Strategy Board had been established some 12 months ago in response to the current pressures on urgent care and the Accident and Emergency Department at New Cross Hospital. The options detailed in the report would enable an engagement exercise with the public and partners to be undertaken in advance of a formal consultation exercise. He outlined the seven options currently considered to be available.

The Board debated at length the merits and demerits of the various options and considered the experience of partners in relation to the current pressures on, especially, the Accident and Emergency Department at New Cross Hospital and the consequential implications including the effect on the Ambulance Service.

In response to a number of questions and requests, Dr Odum undertook to provide the data sets underpinning the various options which would require endorsement before the report was subject to either engagement or consultation.

- 16 Resolved:
- (i) That the report be received and noted;
  - (ii) That Dr Odum and V Griffin be requested to liaise in relation to the availability of the final document and the need to convene a special meeting of the Board to consider this matter further prior to the commencement of public engagement and/or a public consultation exercise with regard thereto;
  - (iii) That Dr Odum be requested to make available all necessary data sets in advance of the special meeting to enable the underpinning data in relation to the various options to be considered fully.

#### **Healthwatch 2013-14 – Update (Appendix 4)**

V Griffin and M Bygrave presented a report which updated the Board on information in relation to Healthwatch Wolverhampton, its organisational form, Board members and Work Programme. M Bygrave reported that Healthwatch Wolverhampton had been launched formally on 30 April 2013 and was one of the few in the country where the Local Involvement Networks (LINK's) had undergone a smooth transition into the Healthwatch organisation and also one of the very few to have had a formal launch. She reassured the Board that Healthwatch Wolverhampton would build on the foundations of the work undertaken previously by Wolverhampton LINK.

- 17 Resolved:  
That the report be received and noted.

#### **Feedback from Sub Groups**

##### **Children's Trust Board**

S Norman, Strategic Director for Community, reported that the Safeguarding Care Review had been held in March but she advised the Board that there was now a possibility of an unannounced Ofsted Inspection. The Improvement Plan in conjunction with partners had been progressed. A Thematic Inspection on neglect was likely to be held in June. A report at the last meeting of the Children's Trust Board in connection with the Family Nurse Partnership had been received together with a further report on Academic Attainment in the City.

- 18 Resolved:  
That the report be received and noted.

##### **Adults Delivery Board (Appendix 5)**

V Griffin presented a report which detailed the Adult Delivery Board's Work Plan for 2013/14.



- 19 Resolved:  
That the report be received and noted and that the Adult's Delivery Board be requested to add a subsection into its work plan relating to "wellbeing".

Public Health Transition Board

R Jervis reported that the last meeting of the Public Health Transition Board had been held on 18 March 2013 to consider the mechanics of the move of responsibilities for Public Health from the Primary Care Trust to the City Council. She advised that access to data and the transfer of a number of contracts had posed problems but these had been overcome successfully. A Public Health Delivery Board would be established from May 2013 with seven Sub Groups. Reports from the Public Health Delivery Board would be submitted to future meetings of the Board.

- 20 Resolved:  
That the report be received and noted.

**Health Scrutiny Panel (Capital Programme) Sub Group Minutes**

- 21 Resolved:  
That the minutes of the meetings of the Health Scrutiny Panel (Capital Programme) Sub Group held on 7 January 2013, 4 February 2013 and 4 March 2013 be received and noted.

**Mental Health Summit**

R M Jones advised that a Mental Health Summit would be held at Maple House, Birmingham, on 21 June 2013 hosted jointly by the Police and Crime Commissioner and the Birmingham City Health and Wellbeing Board. He advised that Members of the Wolverhampton Health and Wellbeing board would be invited to attend the summit.

- 22 Resolved:  
That the report be received and noted.