



Health and Wellbeing Board Minutes – 4 September 2013

Attendance

Cllr Sandra Samuels (Chair) – Cabinet Member for Health and Wellbeing
Dr David Bush – NHS Wolverhampton
Carol Lamyman – Healthwatch Wolverhampton (substitute for Maxine Bygrave)
Chief Superintendent Neil Evans – West Midlands Police
Cllr Steve Evans – Cabinet Member for Adult Services
Dr Helen Hibbs – Chief Officer, NHS Wolverhampton
Ros Jervis – Director of Public Health, Community Directorate
Tim Johnson – Strategic Director for Education & Enterprise
Bob Jones – West Midlands Police & Crime Commissioner
Professor Linda Lang – University of Wolverhampton
Sarah Norman – Strategic Director for Community
Councillor Paul Singh – Shadow Cabinet Member for Health and Wellbeing

Staff

Viv Griffin	Assistant Director, Health, Wellbeing & Disability, Community Directorate
Andrew Lawley	NHS Property Services
Marianne Page	Section Leader, Transportation, Education and Enterprise Directorate
Sue Wardle	Consultant in Public Health, Community Directorate
Les Williams	Operations & Delivery Director, Local Area Team, NHS England
Richard Young	Director of Strategy and Solutions, NHS Wolverhampton
Carl Craney	Democratic Support Officer, Delivery Directorate

By Invitation

Alan Coe	Independent Chair, Wolverhampton Safeguarding Adults Board
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Part 1 – items open to the press and public

Item No. *Title*

- 1. Apologies for Absence**
Apologies for absence had been received from Maxine Bygrave (Chair, Wolverhampton Healthwatch), Guy Carson (Capital Projects Programme Manager, NHS Property Services and Councillor Val Gibson (Cabinet Member for Children and Families).

2. **Notification of Substitute Members**

Carol Lamyman for Maxine Bygrave (Wolverhampton Healthwatch).

3. **Declarations of interest**

No declarations of interest were made relative to items under consideration at the meeting.

4. **Minutes of the previous meetings (3 and 31 July 2013)**

Resolved:

That the minutes of the meetings held on 3 and 31 July 2013 be approved as a correct record and signed by the Chair.

5. **Matters arising**

Viv Griffin presented a report which informed the Board of the current position with a variety of matters considered at the previous meeting and meetings of the former Shadow Board.

Resolved:

That the report be received and noted.

6. **Chair's Update**

• **The NHS belongs to the people: A Call to Action**

The Chair, Councillor Sandra Samuels reported that a report in connection with the above would be presented by Les Williams, Operations and Delivery Director, Local Area Team, NHS England later in the meeting. The report had been admitted as an urgent item in accordance with Section 100B(4)(b) of the Local Government Act 1972.

• **Public Health Funding Allocation**

The Chair, Councillor Sandra Samuels reported receipt of a letter from Duncan Selby, Chief Executive, NHS England that the Public Health Funding Allocation would be ring-fenced for a third year to 2015/16.

Resolved:

That the Chair's Update be received and noted.

7. **Health and Wellbeing Forward Plan**

Viv Griffin presented the Health and Wellbeing Board Forward Plan for 2013/14.

Resolved:

That the Forward Plan be received and noted and that any additional items be notified to Carl Craney, Democratic Support Officer.

8. **Draft Recommendations on the Future of Services for Local People using Stafford and Cannock Hospitals – Consultation**

Dr Helen Hibbs presented a report in connection with the Trust Special Administrators' draft recommendations on the future of services for local

people using Stafford and Cannock Chase hospitals. The recommendations were currently the subject of a public consultation exercise primarily aimed at those patients who currently used those hospitals and advised the Board that any changes to service provision at New Cross Hospital would be the subject of a separate consultation exercise. She reported that the proposals contained within the recommendations included the Cannock Chase Hospital being managed by the Royal Wolverhampton NHS Trust and some services transferring from Cannock to New Cross Hospital. She advised that from the perspective of NHS Wolverhampton the proposals were to be welcomed as they presented an opportunity for more patients to utilise New Cross Hospital which, in turn, would serve to “future proof” the New Cross facility.

Carol Lamyman advised that Healthwatch Wolverhampton would be responding separately to the Trust Special Administrators’ recommendations and that she had also been contacted by the BBC who was proposing to film an article in relation to the current position at the Accident and Emergency Department at New Cross Hospital.

Sarah Norman commented on the implications for the City Council with the likelihood of Wolverhampton residents being treated at Cannock Hospital and the effect on the Social Work Team. She reported that discussions were underway with Staffordshire County Council with regard to the mirrored position of Staffordshire residents being treated at New Cross Hospital.

Dr Helen Hibbs repeated her earlier comments that no firm decision had yet been made and that any proposed changes to services provided at New Cross Hospital would be subject to a separate consultation exercise. Les Williams confirmed this to be the case with any proposed major variation to existing services. Sarah Norman acknowledged the point but reminded the Board of the needs of the City Council to be prepared for the consequential effects of any changes.

Resolved:

That the proposals contained within the consultation document be noted.

9. **Report of the Chair of the Adults’ Safeguarding Board**

Alan Coe, Independent Chair of the Wolverhampton Adults’ Safeguarding Board presented a report which outlined the work undertaken by the Safeguarding Board to support adults at risk remain safe as summarised in the 2012/13 Annual Report. An Executive Summary of the Annual Report was circulated at the meeting.

Resolved:

1. That the contents of the report and the priorities set for 2013/15 be noted and supported both collectively and individually;

2. That the respective agencies be requested to ensure that the work of the Board is supported actively to ensure:
 - That the agencies and organisations report formally each year on the work of the Board to their respective governing bodies;
 - By reporting to their own agencies and governing bodies on their own individual agency actions to help keep adults at risk safe;
3. That the various bodies ensure that their representatives on the Board and relevant sub groups and task and finish groups of the various bodies are enabled to make a full contribution to the safeguarding agenda

10. **Joint Strategic Needs Assessment for Wolverhampton**

Ros Jervis and Sue Wardle presented a report on the process that had been used to produce the Joint Strategic Needs Assessment (JSNA) for Wolverhampton and invited the Board to approve the JSNA for publication at the earliest opportunity.

Sue Wardle advised that once approved, the JSNA would be published in a loose leaf format to aid with regular updating. She reported on the robust process which had been followed in the production of the document.

Bob Jones referred to the quantitative and qualitative information contained within the document but expressed concern that in Appendix 9 it appeared that none of the views of the City Councillors had been received. He questioned as to whether this was correct and, if so, whether the methodology behind the production of the document needed to be reviewed. Viv Griffin assured the Board that this gap had been noted but that the views of City Councillors had been sought and of their contributions through the various "Away Days" held leading to the production of the document.

Resolved:

1. That the process for producing the Joint Strategic Needs Assessment (JSNA), led locally by the Joint Health and Wellbeing Strategy Task and Finish Group and its focus on outcomes and links with the Health and Wellbeing Strategy be noted;
2. That the JSNA be approved for publication by the Joint Health and Wellbeing Strategy Task and Finish Group in conjunction with Wolverhampton City Council Communications Team.

11. **Health and Wellbeing Strategy**

Viv Griffin reminded the Board that at the meeting held on 1 May 2013 the priorities for the Board and its sub-groups had been agreed for 2013/14 and the progress on the JSNA/ Health and Wellbeing Strategy (Mark 2) had been noted. The updating of the Health and Wellbeing Strategy (Mark 2) had been coordinated by the Task and Finish Group and was now complete. The updated Strategy needed to be considered alongside the refreshed JSNA (see above). She invited the Board to consider the updated Strategy.

Viv Griffin reported on her intention to produce and present a “Balanced Scorecard to future meetings of the Board to enable progress with the implementation of the refreshed Strategy to be monitored.

Carol Lamyman commented on her keenness to be involved in those aspects of the Strategy relating to Mental Health and undertook to arrange to meet with Viv Griffin to discuss this matter further.

Richard Young reported on the current position with regard to Urgent Care and that following the meeting of the Board held on 31 July 2013 the Strategy document was being re-drafted to take into account the views expressed at that meeting. The revised document would be presented to the meeting of the Board scheduled to be held on 6 November 2013 and would include a communication and engagement plan. The revised document would be presented to the Adults Delivery Board for consideration prior to its consideration by this Board.

He reported on the work which was underway in relation to a revised procurement methodology for the “Out of Hours” service including various alternative methods of delivering this service with a view to ensuring that patients received the right care in the right place at the right time. He also reported on attempts that were being made by NHS Wolverhampton in conjunction with the Royal Wolverhampton NHS Trust and the Local Area Team of NHS England to address a number of common misconceptions surrounding access to General Practitioners in Wolverhampton.

Professor Linda Lang drew to the attention of the Board a number of initiatives which had been discussed at a forum on Emergency Care which had been held in Birmingham in July and enquired as to whether any consideration was being given to these types of initiatives. Richard Young responded that NHS Wolverhampton had been represented at this particular forum and that the initiatives discussed were being considered actively for inclusion in the Wolverhampton Urgent Care Strategy.

Resolved:

1. That the draft Health and Wellbeing Strategy (Mark 2) be approved for publication;
2. That the best thanks of the Board be extended to the Task and Finish Group for its work on the production of both the JSNA and the Health and Wellbeing Strategy (Mark 2).
3. That the report on the current position in relation to Urgent Care be noted and that a further report on this matter be considered at the meeting of the Board scheduled for 6 November 2013.

12. **Feedback from Health and Wellbeing Board “Away Day” – Response to the Francis Inquiry**

Viv Griffin presented a report which informed the Board of the outcome of the “Away Day” held on 31 July 2013 to consider a City wide response to the Francis Inquiry into the failings at the Mid Staffordshire NHS Foundation Trust. It was suggested that a Task and Finish Group be established as a Sub Committee of the Health and Wellbeing Board to develop the action plan and

the whole system response. The Group would be led and chaired by NHS Wolverhampton and include representation from social Care / Health Providers / Health Scrutiny / Healthwatch. Dr Helen Hibbs advised that NHS Wolverhampton would be willing to lead and chair the Group.

Resolved:

1. That the report be received and noted;
2. That the suggested Task and Finish Group be established and led and chaired by NHS Wolverhampton.

13. **Winterbourne Review – Implications for Wolverhampton**

Viv Griffin presented a report which described the findings of the investigations into the abuse of patients with learning disabilities at Winterbourne View Hospital and which summarised local work to date to respond to the National report Transforming Care: A National Response to Winterbourne Hospital. She drew to the attention of the Board proposals to go further in Wolverhampton in terms of inspections than required nationally and on the intention to use this inspection regime as an example of best practice.

Carol Lamyman commented on her keenness to be involved in those aspects of the revised working practices and undertook to arrange to meet with Viv Griffin to discuss this matter further.

Resolved:

That the report be received and noted.

14. **NHS Capital Programme**

Andrew Lawley reported on the current position with the following schemes in Wolverhampton:

- Bradley;
- Bilston Urban Village;
- The Scotlands; and
- Heath Town.

On behalf of the Board the Chair, Councillor Sandra Samuels expressed her concern and displeasure with the manner in which the progress or lack of progress on these schemes had come to the attention of the Board, inasmuch as it had been reported in the local press without first having been drawn to the attention of the constituent members. She advised that an apology had, however, been received from NHS England with regard to this matter.

Andrew Lawley explained that the precise responsibilities between NHS England and NHS Property Services with regard to informing partners of the position on schemes remained unclear between the 2 branches of the newly reconfigured NHS. Les Williams repeated his previous apology for the handling of this matter but assured the Board that where security of tenure of medical facilities was a primary cause of concern; this was being addressed as a priority issue.

Sarah Norman welcomed the comments now made by Les Williams but enquired as to whether, in the case of premises where security of tenure was an issue but the need for improvement works or possible re-location was of

equal importance, whether both components were being treated as priority matters, given the need to identify long term solutions rather than short term fixes.

Andrew Lawley advised on the need to re-visit the now outdated former Capital Strategies of the Primary Care Trust and of the intention of both NHS England and NHS Property Services to work with NHS Wolverhampton and partners to identify long term solutions to the current issues. Sarah Norman enquired as to when NHS England would be in a position to respond on the possible future use of Underhill House.

Councillor Steve Evans opined that the current position was a result of the transformation of the NHS and that under the current process he had felt, as the Cabinet Member for Adults, side-lined during the various discussions within the NHS, particularly with regard to the possible future use of Underhill House. He enquired as to the responsible body for the Capital Programme approval process, who that body was accountable to and how the Board could seek to influence the decision making process. Les Williams advised that this process was managed by NHS England, of the financial position of that body and offered an assurance that the Local Area Team of NHS England was endeavouring to secure satisfactory outcomes for the Birmingham, Solihull and Black Country area despite the competition for funding from a finite pot across the country.

Bob Jones sought clarification on the current budgetary position and as to whether the Local Area Team had a ring-fenced budget for use in its area. Les Williams and Andrew Lawley explained the division of responsibilities for the allocation of resources within the current NHS Operating Model. Andrew Lawley drew to the attention of the Board the specific issues which needed to be addressed at the Lower Bradley premises and the options available in the short term together with the steps which could be taken to affect a medium term solution to these particular issues.

Following a question from the Chair, Councillor Sandra Samuels, Les Williams advised that the Board could seek to influence the process via correspondence with either the Regional Director of NHS England (Paul Watson) or the Chief Executive of NHS England Dame Barbara Hakin).

Ros Jervis reported on the outcome of a visit to the Heath Town premises to conduct an inspection for Infection Prevention and Control purposes and of the outcome of the inspection. Andrew Lawley thanked the City Council for the proposals it had put forward with regard to the identification of suitable alternative premises.

Resolved:

That the Regional Director of NHS England be requested to explain the apparent current impasse on improvements to Primary Care facilities in Wolverhampton and to attend a future meeting of the Board to respond to questions on a number of outstanding issues.

14. **Feedback from Sub Groups**

• **Children's Trust Board**

Sarah Norman presented a report which informed the Board of the work of the Children's Trust Board. She drew particular attention to the following issues which had been considered at the last meeting of the Children's Trust Board:

- Work on new arrivals in the City;
- The 4 priorities identified in the new Children, Young People and Families Plan;
- The revised Mental Health and Psychological Wellbeing Strategy for Children and Young People;
- Challenges faced by the City Council with the increasing number of Looked After Children.

Sarah Norman responded to a number of questions regarding the latter issue and reported on plans to recruit additional Social workers to assist with this matter.

Resolved:

That the report be received and noted.

• **Adults Delivery Board**

Viv Griffin presented a report on the work of the Adults Delivery Board in regard to the work plan for 2013/14 and drew to the attention of the Board the strong correlation between the work of the Adults Delivery Board and the contents of the Health and Wellbeing Strategy.

Resolved:

That the report be received and noted.

• **Public Health Delivery Board**

Ros Jervis presented a report which advised the Board on the work of the Public Health Delivery Board with regard to the development of a work plan and highlighted the latest developments in relation to the Public Health Transformational Fund, namely the:

- Eligibility criteria;
- The process for submitting bids; and
- The process for assessing bids and making decisions on allocations.

Resolved:

That the report be received and noted, in particular the progress on the Public Health Transformational Fund and that the process, criteria and the Board's role in approving / ratifying recommended projects be endorsed.

16. **Bus Service Connections to New Cross Hospital**

Marianne Page presented an updated report on the continuing work to improve public transport accessibility to New Cross Hospital.

Resolved:

That the report be received and noted and that a copy of any response received from the letter to the Integrated Transport Authority agreed at the meeting held on 3 July 2013 be circulated to all members of the Board.

Urgent
Item

The NHS belongs to the people: A Call to Action

(In accordance with Section 100B(4) (b) of the Local Government Act 1972 this item was admitted for consideration)

Les Williams presented a report in relation to the document "The NHS belongs to the people: A Call to Action" which had been published by NHS England on 11 July 2013. He explained the contents and purposes of the document.

Viv Griffin enquired as to when comments on the document needed to be submitted. Les Williams advised that the closing date was December 2013. Sarah Norman suggested that given the current transformation programme both locally and nationally the contents of the document needed to be amended and integrated to reflect the work being undertaken locally to be meaningful to the local health economy. She advised that there would be a reluctance to adopt nationally dictated templates and communication plans which did not accurately reflect the current local position. Dr Helen Hibbs commented that many of the issues which were contained in the document were day to day matters for NHS Wolverhampton which would be undertaken as a matter of course. She suggested that there was an urgent need to align national and local pieces of work.

Les Williams advised that, from the NHS England perspective, the concentration on outcomes rather than the form of engagement would be paramount. He outlined the range of publicity material which could be made available for the various proposed engagement events.

Resolved:

That the publication of the document now presented be noted.