



Health and Wellbeing Board

Minutes – 8 January 2014

Attendance

Cllr Susan Constable	
Cllr Steve Evans	Cabinet Member for Adult Services
Cllr Val Gibson	Cabinet Member for Children and Families
Dr Helen Hibbs	Chief Officer, Wolverhampton CCG
Ros Jervis	Director of Public Health, Community Directorate
Bob Jones	West Midlands Police & Crime Commissioner
Sarah Norman	Strategic Director for Community
Cllr Paul Singh	Shadow Cabinet Member for Health and Wellbeing

Employees

Maxine Bygrave	Chair, Wolverhampton Healthwatch
Viv Griffin	Assistant Director, Health, Wellbeing & Disability, Community Directorate
Ros Jervis	Director of Public Health
Mark Lane	Commissioning Strategy Manager, Wolverhampton CCG
Mark O'Hara	West Midlands Police
Richard Young	Director of Strategy and Solutions, Wolverhampton CCG
Les Williams	NHS England
John Wright	Democratic Support Manager

Part 1 – items open to the press and public

- | <i>Item No.</i> | <i>Title</i> |
|-----------------|--|
| 1 | Election of Chair
Resolved that Cllr Val Gibson be elected chair for the meeting. |
| 2. | Apologies for Absence
Apologies for absence had been received from Cllr Sandra Samuels, Tim Johnson and Jan Thomas-West. |
| 3. | Notification of Substitute Members |

No notifications of substitutions had been received

4. **Declarations of interest**

No declarations of interest were made

5. **Minutes of the previous meeting (6 November 2013)**

Resolved:

That the minutes of the meeting held on 6 November 2013 be approved as a correct record and signed by the Chair.

6. **Summary of outstanding matters**

The Board was informed of anticipated timescales for the presentation of reports requested at previous meetings of the Board.

Resolved:

That the report be received and noted.

7. **Chair's update**

The Chair referred to reforms that were being introduced requiring the certification of doctors as fit to practice. The government had indicated that the reforms would be implemented in October 2014 and would be preceded by a consultation period.

Resolved:

1. That the Chair's update be noted.
2. A further report on certification of doctors be submitted to a future meeting of the Board

8. **Health and Wellbeing Forward Plan**

Consideration was given to the Health and Wellbeing Board forward plan for 2013/14. It was noted that there would be a special meeting of the Board on 5 February.

Resolved:

That the forward plan be received.

9. **NHS Wolverhampton (Wolverhampton Clinical Commissioning Group) – Commissioning Intentions**

Mark Lane gave a presentation on the commissioning intentions of the Wolverhampton Clinical Commissioning Group. The presentation covered

- The milestones for the two year operating plan which would be included in the final version of the operating plan
- The three strategic objectives and the consequent , priority areas benefits for patients, outcome indicators and targets
- The vehicles for delivering the strategic objectives
- Timelines between 2014/15 and 2018/19 for implementation

- The long term conditions work-stream
- NHS Planning Guidance 2013
- Commissioning Intentions for 2014-2016
- Key challenges
- Contractual intentions
- Transformational service change
- Requirements
- Unplanned care
- Planned care
- Primary and Community Care
- Mental Health
- The prioritisation framework

The Board considered the issues raised by the presentation. Concern was expressed at the volume of work that needed to be completed. It was explained that the processes outlined in the presentation simplified what needed to be done. There would be an increased focus on how patients could be managed outside hospital.

It was noted that references needed to be included to the changes arising from the Better Care bill. Milestones also needed to be included relating to special educational needs and the Children and Families Bill. A report on how these issues could be integrated would be submitted to a future meeting of the Board.

It was noted that the seven ambitions detailed in the presentation related to improving the patient experience. Work was underway on the development of measures of success. It was recognised that there was a need to link up NHS guidance with the delivery of plans and performance management.

It was agreed that there would need to be a continued dialogue about the implementation of the commissioning intentions.

Resolved:

- 1) That the presentation be noted.
- 2) That a report be submitted to a future meeting of the Board on the integration of issues arising from the Better Care Bill and the Children and Families Bill
- 3) That a report be submitted to a future meeting of the Board on the Primary Care Strategy

10. **Children, Young People & Families Plan 2014**

A report was received on the approach being taken to and progress made in developing the Children, Young People and Families Plan. The aim of the

plan was to identify gaps and priority areas and to

- Understand the needs of Children, Young People and Families in Wolverhampton
- Identify the priorities that need to be addressed in relation to Children, Young People and Families in Wolverhampton
- Deliver improved outcomes for Children, Young People and Families in Wolverhampton in line with the priorities identified

The first two phases of consultation had been completed. The strategic framework and targets were being brought together. Targets would be for two, five and ten year periods. The framework would be subject to a third consultation phase prior to finalisation.

It was noted that the plan would aim to bring together information on the numbers of parents receiving treatment for substance abuse, children suffering abuse and families with mental health issues. It was recognised that it would be difficult to bring the information together but targeted work was underway.

Resolved:

That the report be received

11. **Implementation of Special Educational Needs and Disabilities (SEND) reforms**

The Board considered a progress report on the reforms outlined in the Children and Families Bill 2013 in relation to children with Special Educational Needs and Disabilities in Wolverhampton. The report outlined the progress to date, the key actions required by September 2014, the current risks and issues and activity planned to mitigate against those issues.

The Board was informed that a lot of work had been carried out to date in response to issues raised by the Children and Families Bill 2013. The Bill proposed changes to the arrangements for local authorities to allocate the schools block element of the Designated School Grant. Changes had been made to the way that all providers within the schools sector receive their funding, with a higher proportion of funding going to schools/settings via a notional SEND budget to meet pupils' additional needs.

The Board was informed that the draft Code of Practice recommended that Health and Wellbeing Boards have oversight of the delivery of the SEND reforms. Consequently it was proposed that a sub group of the Board be established to carry out this role and to report to the Board. The Board was informed that a series of operational groups would look at each of the milestones that needed to be achieved by September 2014. Those groups would report to the SEND Strategy Group which would in turn to the

Children's Delivery Board. The Children's Delivery Board would submit high level progress reports to the Health and Well Being Board.

The report detailed the key milestones which needed to deliver outputs by September 2014. The milestones were to provide a web based local offer for children and young people; an education, health and care plan to replace the current Statement of Special Educational Needs; a schools' local offer and personal budgets for children and their families.

The Board was informed that a number of local authorities have been awarded Pathfinder status to support the implementation of the SEND reforms. Whilst Wolverhampton was not formally a Pathfinder; the work that had been undertaken had been recognised nationally by the Children and Families Minister. Good practice from Wolverhampton had been cited in a Department for Education publication and a case study from Wolverhampton would be included in the updated Pathfinder toolkit.

It was noted that the CCG were fully committed to moving forward the issues covered by the report.

Resolved:

- 1) That the revised governance and accountability of the SEND project in relation to the Health and Wellbeing Board be approved
- 2) That the SEND Strategy Group be a time limited sub group of the Health and Wellbeing Board which reports progress on a regular basis to the Board, and risks and issues by exception.
- 3) The progress to date with regard to phase 1 of the SEND reforms and the high level project plan for phase 2 of the project be received.

12. **Children's Safeguarding Peer Review and Action Plan**

The Board was asked to consider the report and findings of the Safeguarding Children Peer Review and an update of the Wolverhampton Safeguarding Children Improvement Plan. The report detailed the Improvement Plan that had been constructed as the response to those findings.

The Board was informed that a number of issues had been identified as needing to be addressed urgently and in advance of any Ofsted inspection. There was now confidence that there would be a positive outcome if an inspection was undertaken. Ofsted had changed their inspection regime and had raise the bar in terms of assessments and the council would continue to aspire to achieve a good rating.

It was recognised that previously the Board had not been sufficiently cited on children's issues and in future the use of themed Board meetings would enable this to be addressed. The Board was assured that every child now had an up to date core assessment.

The Board was informed that following single status social worker salaries were competitive. There had been 40 applicants for 6 recently advertised posts. The Council was seen as a good employer.

Resolved:

- 1) That the report be received.

13.

Feedback from Sub Groups

- **Children's Trust Board**

Councillor Gibson noted that attendance by partner organisations at Board meetings had been poor. A meeting would be held with the partners to review the need for the Board and if the terms of reference were adequate.

Resolved:

- 1) That the report be received.
- 2) That a report on the outcome of the meeting with the partners be submitted to the next meeting of this Board

- **Adults Delivery Board**

Viv Griffin presented a report on the work of the Adults Delivery Board. The focus of the last meeting had been on the Better Care Fund. It was noted that a special meeting of the Health and Well Being Board would be held in February to consider the Better Care Fund

Resolved:

- That the report be received.

- **Public Health Delivery Board**

Ros Jervis presented a report on the work of the Public Health Delivery Board. It was noted that the Board was expanding to include two additional members. The last meeting had received a presentation on how to engage with schools over lifestyle issues, behaviour change which may lead to sustainable public health outcomes.

It was noted that a report would be submitted to a future meeting of the Health and Well Being Board on the Local Government Declaration on Tobacco Control.

Consideration had also been given to providing contraception advice to vulnerable women and this would be added to the contract for sexual health. It had direct links to the looked after children agenda

Resolved:

- 1) That the report be received

2) That a report be submitted to a future meeting of the Health and Well Being Board on the Local Government Declaration on Tobacco Control.

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Any Other Business

It was noted that Chris Irvine would attend future meetings of the Board to represent the Voluntary Sector Partnership. Annual Council would be asked to confirm her involvement as a formally co-opted member of the Board

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