

Health and Wellbeing Board

Minutes - 19 October 2016

Attendance

Members of the Health and Wellbeing Board

Councillor Val Gibson	City of Wolverhampton Council
Ros Jervis	Service Director - Public Health and Wellbeing
Councillor Roger Lawrence	Chair - City of Wolverhampton Council
Councillor Paul Sweet	City of Wolverhampton Council
Linda Sanders,	Strategic Director, People
David Loughton	Chief Executive The Royal Wolverhampton Hospital NHS Trust
Jeremy Vanes	Chairman The Royal Wolverhampton Hospital NHS Trust
Donald McIntosh	Healthwatch Wolverhampton
Robin Morrison	Healthwatch Wolverhampton
Alan Coe	Independent Chair Wolverhampton Safeguarding Boards
Steven Cartwright	Business Change Manager

Employees

Paul Smith	Interim Manager for Commissioning Older People
Earl Piggott-Smith	Scrutiny Officer
Steven Cartwright	Programme Manager, Transforming Adult Social Care

In attendance

Sara Fellows	NHS Wolverhampton CCG
Andrea Smith	NHS Wolverhampton CCG
Karen Evans	NHS Wolverhampton CCG
Tracey Cotterill	BCPFT
Chief Inspector Tracey Packham	West Midlands Police
Paul Smith	Head of Commissioning - Older People

Part 1 – items open to the press and public

Item No. *Title*

1 **Apologies for absence (if any)**

Apologies were received from the following members of the Board:

- Councillor Sandra Samuels
- Councillor Paul Singh
- Chief Superintendent Jayne Meir
- Tracy Taylor – Chief Executive - Black Country Partnership NHS Foundation Trust
- Dr Alexandra Hopkins – University of Wolverhampton

2 **Notification of substitute members (if any)**

Tracey Cotterill attended the meeting on behalf of Tracy Taylor – Black Country Partnerships Foundation Trust

Chief Superintendent Jayne Meir attended the meeting on behalf of Chief Inspector Tracey Packham

3 **Declarations of interest (if any)**

There were no declarations of interest.

4 **Minutes of the previous meeting**

That the minutes of the meeting held on 20 July 2016 be confirmed as a correct record and signed by the Chair.

5 **Matters arising**

There were no matters arising from the minutes.

6 **Summary of outstanding matters**

Resolved:

The summary of outstanding minutes was noted.

7 **Health and Wellbeing Board Forward Plan 2016/17**

Ros Jervis, Service Director Public Health and Wellbeing, introduced the report and explained that the new layout is an initial proposal to make the agenda planning process more inclusive and dynamic. The new form will include a short summary about each agenda item. The changes are intended to set out a rolling programme of issues that will be discussed by the Board. The plan will be updated at each meeting.

The Service Director encouraged representatives of partner organisations to submit items for the agenda. The Board were invited to comment on the draft forward plan.

The Board supported the proposed changes to the forward plan and welcomed the opportunity to submit agenda items.

Alan Coe, Wolverhampton Safeguarding Board, suggested that the annual reports for the Adult Safeguarding and Children's Safeguarding Boards should be added to the agenda for meeting on 30 November 2016.

Resolved

1. The Board agreed to merge the summary of outstanding matters into the new forward plan format for future meetings.
2. The annual Safeguarding Board reports to be presented to the Board on 30 November 2016 for consideration.

8 **Child and Adolescent Mental Health Services (CAMHS) Local Transformation Plan**

Sarah Fellows, Mental Health Commissioning Manager, Wolverhampton Clinical Commissioning Group, presented the report on behalf of Fred Gravestock who was unable to attend the meeting.

The Mental Health Commissioning Manager explained that the organisation is required to refresh its Wolverhampton Children & Young People's Mental Health and Wellbeing Local Transformation Plan and present it to the Board for sign off.

The Mental Health Commissioning Manager gave an overview of the vision in the plan to provide young people and children in Wolverhampton with access to timely, integrated and high quality mental health services that are accessible and responsive to their needs.

The Mental Health Commissioning Manager commented on the importance of delivering services that can respond to the growing need and increased demand upon the whole health service. The strategy is proposing to transform the delivery of the CAMHS service. The CCG is working with NHS England to deliver a more responsive service across Wolverhampton.

The Board were invited to comment on the plan. The Board made reference to other initiatives such as HeadStart which is aimed at improving the emotional health and wellbeing of children and young people and the link to the plan.

The panel requested an update on the Children's Outcomes Framework (Appendix A) so that it covers the same period as the GANTT chart (Appendix F) so that the Board can reach a more informed view about the plans for the service. The Mental Health Commissioning Manager agreed to bring a refreshed GANTT chart to a future meeting of the Board.

The Board discussed the reference in the document to tier 1 and 2 and stated aim in the same document to implement a tier-less whole system across health, education and social care. The Board suggested that the document needs to be more consistent and the language used needs to reflect the clear focus on partnership working. The Board suggested an alternative description of the service is needed.

The Mental Health Commissioning Manager accepted the continued use of Tier 1 and Tier 2 was confusing and the issue had already been highlighted in discussions with colleagues. The situation is complicated by the funding process used by NHS England which uses these terms to describe the level of services available. The Mental Health Commissioning Manager agreed to discuss this further with colleagues and report the outcome to a future meeting of the Board. The Mental Health Commissioning Manager advised the Board that a submission for funding has been submitted to NHS England.

The Board queried how the plan will better meet the needs of adult black males who are over represented in terms of accessing mental services, but much lower numbers are reported as accessing these services aimed at children and young people. The Mental Health Commissioning Manager accepted that there is an over representation of older male men in the service. This issue is a priority issue for the service and work is being with BCPFT to look at what the current provision is and how it is meeting the needs of black and minority groups. The review will also consider meeting the mental health needs of new arrivals to the City.

The Board queried the reference in the plan to the role of GPs and willingness to engage with other agencies in identifying young people who may need to be referred to appropriate wellbeing services. The Board discussed the recent findings of Children's Commissioner report detailing the poor experiences of users across England wanting to access mental health services.

The panel discussed the wider impact on the individual and society of not identifying and supporting young people, in particular vulnerable children, who need to be appropriately referred.

Resolved:

The Board agreed to sign-off the refresh of the Wolverhampton Children & Young People's Mental Health and Wellbeing Local Transformation Plan.

- 9 **Wolverhampton Integrated End of Life Care Strategy**
Karen Evans, Solutions and Development Manager (Wolverhampton CCG) introduced the report and explained that the report details the progress in developing an integrated strategy for end of life care. The strategy provides a whole pathway approach to end of life care. The Board were asked to consider and formally approve the final version of the strategy. The Solutions and Development Manager commented that the strategy puts the patient at the centre and ensures services are responsive and can support the needs and choices of patients and those closest to them.

The Solutions and Development Manager commented that the strategy has been informed by national guidance and also a recognition that the Strategy seeks to ensure that professionals and services deliver the best possible person centred care and support to people as they approach the end of life.

The Solutions and Development Manager outlined the vision for the new End of Life service and confirmed that the Strategy was co-produced with all partners to ensure support for the integrated strategy.

The Board discussed the importance of people having a choice about their care arrangements and being involved in key decisions. The Board supported the view that the strategy should take account of the wishes of the patient.

The Board discussed the challenges of people do not have the capacity to make informed decisions about their end of life care arrangements and the need for appropriate safeguarding arrangements. The issue of people dying in care homes and the need to ensure that plans are followed. The Board commented that Staffordshire have produced some interesting work in end of life which could be shared with members.

The Board discussed the statistics on the place of death – when compared to the England average the rate of Wolverhampton is higher than average in all categories of deaths in hospital. The rates for people that choose to die either in their own home or care home is lower in Wolverhampton when compared to the England average. The findings suggest that most people would prefer to die in their own home rather than in a clinical setting. The Board discussed the validity of the measure and extent to which people feel enough confident to make a choice.

Resolved:

The Board agreed to endorse the Wolverhampton Integrated End of Life Care Strategy.

10 **Workshop "Living Well, Feeling Safe"**

Linda Sanders, Strategic Director – People, outlined a proposal to host an event to raise the profile of the work of HWBB. The suggested date for the event is February 2017 and that it should involving community and voluntary groups in the steering group. The Board suggested that the event could be linked to Residents Week – this event is planned for March 2017 and how it can be supported. The Board discussed possible topics that could be included. The Board supported the idea that wellbeing could be a theme of the event.

Resolved:

1. The Board endorsed the idea of hosting a “Living Well, Feeling Safe” event in Wolverhampton during 2017.
2. Members of the Board were invited to either share their ideas for the event or to volunteer to be part of the working group.

11 **Wolverhampton CCG Commissioning Intentions 2017/18-2018/19**

Steven Marshall, Director of Strategy and Transformation, introduced the report. The report provides an update on progress across a range of health activities. The Director of Strategy and Transformation advised the Board that the CCG will become responsible for commissioning primary and medical services from 1.4.2017. The Director of Strategy and Transformation advised that it will take time to deliver programme of work detailed in the roadmaps.

The Board were invited to endorse the commissioning intentions of the CCG detailed in the report.

The Board queried the opportunities for the public to be involved in the developing and shaping the commissioning of services. The Director of Strategy and Transformation advised that the development of the strategy has involved public consultation in developing new models of care. The aim of the changes is to achieve the best outcome for patients.

Resolved:

The Board agreed to endorse the commissioning intentions of the CCG as detailed in the report.

12 **Primary Care Strategy - update**

Steven Marshall, Director of Strategy and Transformation, introduced the report and explained that this report is an update on progress. The Director of Strategy advised the Board about the programme about the list of activities aimed at delivering the Primary Care Strategy.

The Board commented on the level of fees charged by GPs for the provision of preventative and enhanced services and queried whether the planned changes will give the CCG greater control over this area. The Director of Strategy and Transformation commented that as GPs are independent contractors the issue of the fees will need to be negotiated as part of a future discussion about commissioning intentions.

The Director of Strategy advised the Board that Wolverhampton CCG is currently in the process of completing an application to NHS England for fully delegated responsibilities for the commissioning of primary medical services from 1 April 2017.

The delegated commissioning model delivers a number of benefits for the Wolverhampton population and allows CCGs greater ability to transform local primary care services.

Resolved:

The Board welcomed the report and noted the progress towards the implementation of the CCG Primary Care Strategy.

13 **Better Care Fund (BCF) update**

Paul Smith, Acting Head of People Commissioning, introduced the report and gave a summary of the progress made towards the delivery of the 2016/17 programme plan. The Acting Head of People Commissioning advised the Board that the rapid intervention teams had expanded from a Monday to Friday service to a seven day service to help prevent emergency admission.

The Acting Head of People Commissioning gave examples of recent work streams aimed at improving the patient experience funded by the BCF programme. For example, the dementia care work stream and the Memory Matters pilot. The project was launched in July 2016 and is based in Wednesfield Library. The Acting Head of People Commissioning advised that there are discussions about offering the service in other areas. The aim is have three co-located teams supporting this project. The Board welcomed the plans for the co-location of services. The Board queried the criteria that would be used to determine the sites and wanted an assurance that service users and carers will be involved in the decision. Linda Sanders confirmed that the public would be consulted about the location of sites.

Linda Sanders commented that the City of Wolverhampton Council had been nominated to be named Dementia Friendly Organisation of the Year at this year's Alzheimer's Society Dementia Friendly Awards.

The Board queried the rationale for using the system Graphnet as the Black Country standard in the medium term to support the sharing of data across the health and social care system, while planning to introduce the Fibonacci system locally, which is due to go live in December 2016. The Board were reassured of the plans to introduce a system can that can provide professionals with real time access to patient and social care records.

Resolved:

The Board welcomed the report and noted the progress towards the delivery of the 2016/17 programme plan.

14 **Public Health Lifestyle Survey 2016**

Ros Jervis, Service Director for Public Health and Wellbeing, introduced the report and outlined the key findings of the Wolverhampton Healthy Lifestyle Survey. The Service Director advised the Board of the methodology used to collect the survey data. The survey was based on interviews with 9000 residents and checks were done to ensure that the sample was representative of the demographic profile of the city.

The aim of the survey was to identify the level of lifestyle risk factors across the city and to provide better local intelligence. The Service Director advised the Board of the key headlines and the work done to map the impact of multiple risk health factors.

The information will be used to determine how resources will be targeted in the future.

The Board queried the methodology used to identify residents who took part in the doorstep survey and if the timing of visits would exclude some groups. The Service Director reassured the Board that the importance of getting a representative profile was part of the brief given to M-E-L Research, who were commissioned to conduct the survey.

Resolved:

The Board welcomed the report and supported the use of the survey findings to inform the planning and delivery of healthy lifestyle services for the City.

15 **Care Act 2014 Implementation: Stocktake Six Submission Summary - report to follow**

Steven Cartwright, Programme Manager, advised the Board that there has been a requirement as part of the implementation of the Care Act 2014 for all local authorities to submit a regular stocktake of progress in meeting its responsibilities. The Programme Manager gave a summary of Wolverhampton's sixth and final stocktake submission to the Local Government Association (LGA), noting the work undertaken to implement and embed the Care Act reforms in Wolverhampton.

The Board discussed the reference to care given to prisoners detailed in the summary findings and queried the low number of care and support assessments.

Resolved:

The Board welcomed the good progress and the positive comments by the LGA about the performance of the Council in meeting its responsibilities as detailed in the Care Act 2014.

16 **Exclusion of press and public**

To pass the following resolution:

That in accordance with Section 100A (4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item of business as it involves the likely disclosure of exempt information falling within paragraph 3 of Schedule 12A to the Act relating to the business affairs of particular persons.

17 **Sustainability and Transformation Plans (STP) 2016/17 - 2020/2021**

Steven Marshall, Director of Strategy and Transformation, gave a brief update on progress in developing the plan. The plan will be submitted to NHS England on 21 October 2016. The Board discussed the implications of the plan and the level of public consultation.

Resolved:

The Board noted the progress and agreed to receive a further update report at a future meeting.

The meeting closed at 14:25