

**MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING
HELD ON 26 FEBRUARY 2016
9.30 - 11.10 AM**

Responsible Officer: Karen Nixon
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Present

Councillor Brigid Stacey (Chairman)
Councillors Lee Chapman, David Minnery, Professor Rod Thomson, Andy Begley,
Dr Helen Herritty, Dr Julian Povey, Jane Randall-Smith, Paul Tulley and Tina Russell
(substitute for Karen Bradshaw)

62 APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

Apologies for absence were received from Karen Calder, Karen Bradshaw, Neil Carr and Rachel Wintle.

Tina Russell substituted for Karen Bradshaw.

63 DISCLOSABLE PECUNIARY INTERESTS

Members were reminded that they must not participate in the discussion or voting on any matter in which they had a Disclosable Pecuniary Interest and should leave the room prior to the commencement of the debate.

64 MINUTES

RESOLVED: That the minutes of the meeting held on 4 December 2015 be approved as a correct record and signed by the Chairman.

65 PUBLIC QUESTION TIME

Two public questions were received from Mr D Sandbach. A copy of each question and the formal responses were circulated at the meeting (copies attached to the signed minutes).

Mr Sandbach was in attendance and said he would submit his supplementary question to Question 1 in writing after the meeting. In relation to Question 2 he stated that he expected to see good things coming out of the Better Care Fund housing scheme, especially as good housing was key in keeping people healthy.

66 **WHOLE SYSTEM APPROACH INCLUDING SUSTAINABLE TRANSFORMATION PLAN AND HWB STRATEGY**

A presentation was given by Clive Wright, Shropshire Council Chief Executive on a whole system approach (copy attached to the signed minutes), including Telford and Wrekin, Sustainability and Transformation Plan (STP). This covered;

- Taking a whole system approach – what needs to be considered and the vehicles to deliver this.
- An introduction to the STP's.
- What we have to do – national guidance outlines requirements; STP's to be submitted by 30 June and will be formally assessed on July 2016.
- The context of the STP's.
- Access to Transformation Funding.
- What are we doing in Shropshire and Telford and Wrekin?
- Dates and Deadlines & the alignment of Future Fit and STP.
- Visioning
- and concluding with a Questions section.

Representatives from the voluntary sector were pleased to see their inclusion in Visioning and commented that this would be built on and supported.

It was asked how the STP would integrate with Social Care Providers; there were many of them and there was currently no integral vision – they needed to be involved in planning and development too. It was therefore agreed that David Coull be invited to join the Operational Board.

Some concerns were expressed about the alignment of Future Fit and the STP. It was noted that this was still very much “work in progress”, but nevertheless it was an exciting opportunity.

RESOLVED: That subject to David Coull being invited to join the Operational Board, the presentation be welcomed and noted.

67 **HEALTH & WELLBEING STRATEGY - FINAL**

A report on the Final draft version of Shropshire's Health and Wellbeing Strategy (copy attached to the signed minutes) was introduced and amplified by the Director of Health. This had been developed by the Board, with partners and in consideration of what people in Shropshire have been saying about their health and wellbeing over recent years.

Given recent developments it was queried whether the emphasis on integration and ambition was robust enough. After some discussion it was agreed that this should be revisited in 6 to 12 months' time.

RESOLVED:

- a) That the Final Draft Health and Wellbeing Strategy (Appendix A and B) be approved.
- b) That the integration and ambition aspect of the Final Draft Health and Wellbeing Strategy be revisited in 6 to 12 months time.

68 BETTER CARE FUND FINANCE, PERFORMANCE AND DELIVERY REPORT

A report setting out the progress to February 2016 in relation to the finance, performance and delivery elements of the Better Care Fund Plan in 2015/16 and outlining planning for the Better Care Fund in 2016/17 was received by the Board (copy attached to the signed minutes). The report also included the draft Q3 NHS England BCF performance submission for review by the Board.

In introducing the report, the Head of Partnerships and Planning, Shropshire CCG, highlighted that the dementia strategy target was now green and had gone down to 1.4% unplanned admissions rate (it had been 1.77%) which was welcomed by the Board.

Non-elective admissions and DToC remained the main areas of concern, though the Board was assured that future work was aimed at bringing them back on track. It was suggested that an informal conversation be had with Social Care Providers about how they might be able to assist in reducing reducing DToC and non-elective admissions.

Overall, it was noted that Shropshire was moving in the right direction.

Guidance had only been issued that week for the first submission; due in on 2 March, which gave very little time. However officers had already been working on this and were in a good position to move forward. The final draft would be made on 25 April and therefore the Head of Planning and Partnerships highlighted that approval of the final plan may need to be done rather rapidly, which was duly noted.

It was confirmed that the metrics for BCF 2016/17 would remain the same and that payment by performance would not be removed, as had been expected. Therefore the same targets would continue.

RESOLVED:

- a) That the content of the report be noted.
- b) That the performance position, particularly the underperformance on the NEL and DToC metrics be noted.
- c) That the content of Q3 National reporting template be approved and submitted to NHSE.
- d) That the progress on implementation and delivery of the key BCF schemes in 2015/16 be noted.
- e) That the progress on development of schemes for 2016/17 be noted.
- f) That the absence of guidance for submission of 2016/17 BCF Plans and the key elements highlighted in the BCF Policy Framework be noted.

- g) That the likely requirement for the BCF Plan to be approved at pace, once guidance has been published be noted.
- h) That the level of delegated authority for BCF budgetary decisions via the Delivery Group of £100k and under be approved for 2016/17 (as per the recommendation from the Delivery Group).

69 MENTAL HEALTH TRANSFORMATION PLAN

The Head of Safeguarding, introduced and amplified a joint report (copy attached to the signed minutes) which updated the current position of child and adolescent mental health services in Shropshire (CAHMS). The planned programme of transformation for CAHMS in Shropshire was in line with the government direction set out in 'Future Mind' and included the development of 6 programmes and a cross-cutting programme of work.

The joint plan by Shropshire CCG, Shropshire Council and Telford and Wrekin had been submitted. This set out how new investment from government would be spent to transform CAHMS, including the development of the 6 programmes. Each programme had a clear project plan, delivery against which would be monitored through the governance and reporting structures.

It was hoped to recommission the transformed CAHMS service in April 2017.

The Board were pleased and encouraged to see such excellent work being done jointly with all partners. The delivery of each programme would continue to be monitored through the 0-25 Emotional Health and Wellbeing Strategic Group and progress would be reported to the Children's Trust as required.

RESOLVED:

- a) That the report be noted.
- b) That the Health and Wellbeing Board receive progress reports through the Children's Trust.
- c) That a more detailed report on this be made back to a future meeting of the Health and Wellbeing Board by Shropshire CCG (Paul Tulley).
- d) That the Eating Disorder Services (programme 4) be looked at in more detail by the relevant Shropshire Council's Scrutiny Committee.

70 TRANSFORMING CARE PARTNERSHIP BOARD

The Director of Adult Services introduced and amplified a report (copy attached to signed minutes) giving an overview on the Transforming Care Partnership Board (TCP), which was required by NHS England to implement "Building the Right Support – a national plan to develop community services and close in patient facilities" for people with a learning disability and/or autism". This had been developed by NHS England, who prescribed 'national footprints' to take this work forward. It was confirmed that the regional footprint locally would be Shropshire and Telford and Wrekin, with the Senior Responsible Officer being the Director of Adult Services, Telford and Wrekin.

RESOLVED:

- a) That the expectations set out in “Building the Right Support” and letter of 17 November 2015 be noted.
- b) That the arrangements being put in place for a TCP for Shropshire/Telford & Wrekin be noted (previously approved by Shropshire Council Cabinet on 10 February 2016).
- c) That the delegated authority to the Director of Adult Services to sign off the Plan prior to submission, in conjunction with their respective TCP representatives as approved by Shropshire Council Cabinet on 10 February 2016, be noted.
- d) That the Cabinet decision of 10th February 2016 authorising the Head of Social Care, Efficiency and Improvement to be the Council's representative on the TCP be noted.
- e) That future reporting be agreed from the TCP to the Health & Well Being Board and that reports be jointly produced with Shropshire CCG.

71 PRIMARY CARE STRATEGY

A report on the CCG Primary Care Strategy (copy attached to the signed minutes) was introduced and amplified by the Chief Operating Officer, Shropshire CCG. The strategy document described the challenges facing primary care and sought to establish a shared vision and direction of travel to form the basis of further work, to be undertaken with GP practices and other partners, to translate the vision into more detailed plans.

Key themes identified in the Strategy were;

- The benefits of scale and collaboration between practices
- Workforce
- Integrated Care
- Information Technology
- Premises
- Supporting Change
- Commissioning

A discussion ensued about the challenges facing everyone in moving forward. It was agreed that a holistic view was needed and that this was an opportunity to bring in other partners and providers, whilst recognising that they played a key role in the provision of services, for example, social care providers, opticians and pharmacists.

The Healthwatch representative confirmed that they were also keen to contribute which was welcomed and it was particularly highlighted that Healthwatch were highlighting the pharmacy consultation as a ‘hot topic’ over the coming months;

they would be sending their flyer about this to all H&WB members shortly. The Chair confirmed that this would also be reported back to the Quality Surveillance Group.

RESOLVED: That the report be approved.

Signed (Chairman)

Date: