

Minutes of the Meeting of the Shadow Warwickshire Health and Wellbeing Board held on 13 November 2012

Present:-

Chair

Bryan Stoten

Warwickshire County Councillors

Councillor Alan Farnell
Councillor Izzi Seccombe
Councillor Bob Stevens
Councillor Heather Timms

Clinical Commissioning Groups

Dr Kiran Singh – Warwickshire North CCG
Andrea Green – Warwickshire North CCG
Gill Entwistle – South Warwickshire CCG
Dave Spraggett – South Warwickshire CCG
Adrian Canale-Parola – Coventry and Rugby CCG

Warwickshire County Council Officers

Monica Fogarty – Strategic Director, Communities Group
Wendy Fabbro – Strategic Director, People Group
John Linnane – Director of Public Health (WCC/NHS)

Borough/District Councillors

Councillor Sally Bragg – Rugby Borough Council
Councillor Michael Coker – Warwick District Council
Councillor Derek Pickard – North Warwickshire Borough Council

1. (1) Apologies for Absence

Councillor Claire Watson (Rugby Borough Council)
Councillor Jerry Roodhouse (Warwickshire LINK)
Councillor Neil Philips (Nuneaton and Bedworth Borough Council)

(2) Members' Declarations of Pecuniary and Non-Pecuniary Interests

None

(3) Minutes of the meeting held on 24 September 2012 and matters arising

The minutes were agreed as a true record of the meeting. There were no matters arising.

The Chair welcomed various guests and substitutes to the meeting.

2. Green Sleeve – Palliative Care in North Warwickshire

Kiran Singh gave a PowerPoint presentation that explained the need for effective end of life care (EoLC). She introduced the Board to a new EoLC pack that has recently been developed and that will be introduced into North Warwickshire. It is expected that the pack and the information it contains will remain with a patient as they are moved around receiving different care in different locations. It was stressed that whilst funding has been made available for the first batch of packs any future batches will have to be paid for from commissioners or providers budgets. The Board welcomed the initiative and discussed whether other means of identifying patients out in the community could be used. Adrian Canale-Parola from Coventry and Rugby CCG asked whether the forms are recognised cross-boundary. The meeting was informed that national forms will be included in the pack and that there should not be any problems. In response to a question from Councillor Izzi Seccombe the meeting was informed that hospices have been engaged in the process and that people are being trained in communication skills regarding end of life.

3. George Eliot Hospital i) Progress towards Foundation Status and ii) Mortality Rates in North Warwickshire

Chris Bradshaw the Finance Director from the George Eliot Hospital explained that the hospital has produced and presented a business case to the Department of Health and is awaiting a response. He explained that the hospital is looking for an agency to either run the Trust as a franchise or acquire it outright. In response to a question from Monica Fogarty the meeting was informed that any decision will be made through a formal procurement process that will involve teams of stakeholders. In considering bids quality and safety will be addressed along with financial elements. The Board agreed that its members must have an involvement in the process.

Councillor Izzi Seccombe observed that in order to provide assurance to local residents a comprehensive communications strategy is required. This was acknowledged although at the same time the point was made that not everything can be made public as some matters are commercially sensitive.

John Linnane stressed the need for any new arrangements at the George Elliot to work towards addressing health inequalities in the area.

Turning to mortality figures Chris Bradshaw noted that the latest figures do show an improvement but agreed that there remains much to be done. He informed the Board that the Strategic Health Authority has commended the

Trust for not simply regarding mortality rates as a numbers exercise. A deep analysis has been invested in to establish where the challenges lie and the Trust has sought to be open with commissioners around the safety and quality of its services. Performance is very good in terms of infection control, pressure ulcer prevention and Patient Environment Action Team (PEAT) inspections. The point was made that it is taking a long time to see any real improvements and it was noted that the Quality Accounts work currently being undertaken will consider mortality rates amongst other things as part of an on-going dialogue.

Councillor Seccombe advised the Board that whilst poor mortality rates have been attributed to a lack of hospice provision (leading to a greater number of deaths in hospital) there is such provision made by Myton Hospice just over the border in Coventry. In response the Board was informed that referrals to hospices come from all over and it is not just the responsibility of hospitals to make them.

Andrea Green from Warwickshire North CCG confirmed that there is good dialogue between the CCG and the George Eliot Hospital on this and other indicators. Like others she is keen to see the number of mortalities drop and felt assured that the hospital is working hard to achieve this.

Using his experience at Camp Hill in Nuneaton Councillor Tooth observed that it can be difficult to engage with those delivering health services and other community agencies.

The Chair asked that the latest Family and Friends results from the George Eliot Hospital be made available.

4. Warwickshire North CCG – Progress towards Authorisation

Andrea Green informed the Board that Warwickshire North CCG is catching up with others in the authorisation process. She introduced her “plan on a page” explaining that quality is essential along with dignity, respect and compassion. The CCG is keen to make better use of what it spends whilst reducing inequalities and avoiding the loss of information. She added that the CCG’s plan will be finalised in the next month.

John Linnane observed that his department is working well with the CCG and with individual bodies.

5. Priority Families

Nick Gower-Johnson explained that whilst the government initiative is called “Troubled Families” the word “priority” has been chosen in Warwickshire. He noted that there is a seamless link between his work and the previous matters discussed by the Board. 280 priority families have been identified. Half are in Nuneaton and Bedworth, a fifth in Rugby and one-tenth in North Warwickshire. Many of these families are regular clients of local authorities

and partner agencies. A major challenge for the project is to unpick those interventions that have already or are being made. Families will then need to be signed up to the programme. For each family a basic 12 month care plan will be developed. This will include a core offer of registration with a GP, dental care and immunisation. Advice will also be available on smoking cessation where required. The most demanding 40% of families will be allocated a case worker.

Nick was keen to stress that the initiative is not about providing new services; it is about making better use of the resources and agencies that already exist.

Families do not yet know that they have been identified for assistance. Any dialogue with them must be entered into in the right way and at the right time.

6. Warwickshire Safeguarding Children Annual Report

Chris Hallet the Chair of the Safeguarding Children's Board explained its work and that the County Council is responsible for its operation. The meeting was informed that the annual report being discussed looks forwards as well as backwards. Most child protection work is required in the north of the County with early intervention being a key priority.

It was explained that it is never clear whether it is good to have a lot of child protection cases or not. A high number of cases can suggest either extreme vigilance or a generally high incidence of abuse. One area of concern is the lack of engagement with faith groups although work has commenced with Coventry City Council and others on this issue. Wendy Fabbro highlighted the link between child protection plans and deprivation.

The Board was reminded of the proposal to hold a workshop on children's services and Paul Williams was asked to expedite this.

7. Director of Public Health Annual Report 2012 1 in 3: The Picture of Ill Health in Warwickshire

John Linnane introduced his report summarising the key points within it. He outlined various challenges and explained that cancer screening whilst generally uniform has a poor uptake in areas of Nuneaton and Bedworth, Rugby and central Leamington Spa.

8. Health and Wellbeing Board Strategy – Sign off

The Chair explained how 33 responses had been received to consultation on the draft strategy. He considered that there are three core issues that need to be addressed namely, how to mobilise the population, how to achieve 24/7 health and social care and how to get everyone to recognise that all local statutory services can enhance health and wellbeing. The Chair added that most health inequality is linked to income, education and whether or not someone smokes. This view is underpinned by the Marmot Review.

Councillor Derek Pickard relayed comments from the housing divisions at North Warwickshire Borough Council and Rugby Borough Council that the strategy does not say more about housing. This view was repeated by other members of the Board. He was informed that the desire to keep the strategy to a manageable size (ie no more than 20 pages) had meant that where areas of work were not specifically identified as problem areas they were not included. Wendy Fabbro expressed concern that if the strategy does not reflect the priorities of the CCGs it may be seen as a means only of determining how money will be spent. In response the Chair reminded the Board that the intention was for the strategy to guide and inform the CCGs as they develop their commissioning plans. He also observed that the strategy is an evolving document that will be refined over time.

The view was expressed by Dr Adrian Canale Parola that the strategy could be regarded as very “top down”.

There followed a discussion wherein Board members sought to agree a way of progressing the development of the Strategy and engaging with those who had raised concerns. Board members proposed that the strategy should include an action plan, include a focus on integration of services, have a clear vision and provide evidence of how it has been developed.

The Chair called on Wendy Fabbro, Monica Fogarty and Board members to review the draft strategy taking out the components they dislike and adding what they consider appropriate. They were given until 4th December 2012 to address the Board’s concerns.

9. Any other Business (considered urgent by the Chair)

None

The meeting rose at 15.50

.....Chair