

Minutes of the Meeting of the Warwickshire Health and Wellbeing Board held on 20 November 2013.

Present:-

Chair

Councillor Izzi Seccombe

Warwickshire County Councillors (In addition to the Chair)

Councillor Bob Stevens
Councillor Heather Timms

Clinical Commission Groups

Heather Gorrige – Warwickshire North CCG
David Spraggett – South Warwickshire CCG

Warwickshire County Council Officers

Wendy Fabbro – Strategic Director, People Group
Monica Fogarty – Strategic Director, Communities Group
John Linnane – Director of Public Health

Healthwatch Warwickshire

Deb Saunders – Chief Executive Officer

NHS England

Brian Hanford – Associate Medical Director

Borough/District Councillors

Councillor Michael Coker (Warwick District Council)
Councillor Derek Pickard (North Warwickshire Borough Council)
Councillor Gillian Roache (Stratford District Council)
Councillor Roma Taylor (Nuneaton and Bedworth Borough Council)

1. (1) Apologies for Absence

Councillor Maggie O'Rourke (Warwickshire County Council)
Councillor Claire Watson (Rugby Borough Council)
Kevin McGee (Chief Executive, George Eliot Hospital)

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

Councillor Derek Pickard declared a non-pecuniary interest as a member of the County Council's Adult Social Care and Health Overview and Scrutiny Committee and The George Eliot Hospital Stakeholder Group.

(3) Minutes of the meeting held on 25 September 2013 and matters arising

The minutes were agreed as a true record of the meeting.

With regard to the second paragraph of Minute number 4, Deb Saunders (Healthwatch) clarified that this matter related to the Healthwatch Engagement Charter. It was also requested that the date of the next meeting be included on the summons.

2. George Eliot Hospital - Improvement Plan Position Update

Dr Gordon Wood (Associate Medical Director, George Eliot Hospital) updated the Board on the Hospital's work to secure a strategic partner. An outline business case has been produced and the Trust started the procurement phase in September. From the responses received, the Trust was compiling a list of suitable applicants for the next stage.

The Board was updated on the outcome of the Keogh review. This included the George Eliot hospital being joined with University Hospitals Birmingham NHS Trust as part of a 'buddying' process and an outline of the recommendations made for improvement. Other news included the appointment of a new Director of Finance, the positive feedback regarding the new paediatric service and the Trust's ambulatory care unit being shortlisted for an award at the 2013 Health Service Journal awards.

Councillor Bob Stevens sought further information about the statistics on bed days, the objective to improve patient turnover and better ward checks, to secure reductions in hospital inpatient periods. In response to a question from Dr John Linnane, Gordon Wood replied that following the Keogh review, there had been an increase in the numbers of ward rounds by senior doctors and consultants. The mortality statistics had reduced, to a level not considered high. There is an objective to improve further and every death at the Hospital is reviewed, in consultation with the partnered Birmingham NHS Trust.

Councillor Gill Roache asked whether the George Eliot's status was a barrier to attracting staff, which was acknowledged. Achieving 7-day cover was a further issue discussed.

Councillor Heather Timms noted that there was nothing in the update about pressure ulcers. It was heard that an update would be provided to

Board members prior to the next meeting. Ann Mawdsley (Democratic Services, Warwickshire County Council) added that the County Council's Adult Social Care and Health Overview and Scrutiny Committee (ASCHOSC) was due to receive an update from Dawn Wardell on this topic at its next meeting.

Dr Gordon Wood responded to a question from Councillor Michael Coker about the funding required for additional staffing to secure improvements to services and how this would be sustained. The move to 7-day services was a national issue and there was a clear mandate to improve.

Dr John Linnane referred to the numerous challenges being faced by the Hospital. He asked how the Board could be both assured that the Hospital was sustainable and how the Board could help. The role of the Clinical Commissioning Groups was also discussed. Councillor Gillian Roache spoke of the additional burden caused through the requirement to record staff levels on each ward.

Resolved

That the update on the George Eliot Hospital is noted.

3. Priority Families – Partner Engagement and Progress Update

Nick Gower-Johnson (Localities Manager, Warwickshire County Council) explained that the programme was now half way through, but would be extended until at least April 2015.

His report set out the key issues of securing improved linkages between schools and health commissioners / providers, planning for the second phase of the programme and ensuring the programme continued to meet its targets. Background was provided, together with detail on the work on priority families, its aims and commitments. The report set out the proposals to build on good practice from a DCLG publication 'Working with Troubled Families'.

Information was provided about the programmes, the calculation of troubled family numbers in Warwickshire and the assessment criteria. An overview was provided, as at November 2013, of the location of the 991 families involved, disaggregated by area. The work undertaken to date was reported. Five district-based Local Coordinating Groups have been established to identify families and oversee delivery arrangements. Further sections of the report covered segmentation, in terms of the level of intervention required, the resources required to deliver the work and an update on the recruitment of staff. The governance and performance management arrangements were reported, together with key priorities over the coming months.

Reference was made to some of the arrangements in place, an example being those for Camp Hill. Multi agency and partnership working was having a positive impact on the lives of the families supported. To date, funding has been attracted for over 130 families and the benefits for both the families and the local communities were reported. Statistically, the scheme is in the top quartile nationally and details were given of planned way forward.

Wendy Fabbro referred to the scheme's outcomes and requested that details of achievements be circulated. The Chair added that statistics on the numbers of children needing support would be helpful. Wendy Fabbro asked whether there were any residual costs from the scheme and the impact on other existing services and queried if there had been some duplication in service provision. Mr Gower-Johnson provided reassurance on how those involved sought to avoid duplication.

Councillor Bob Stevens commented on the need for prevention rather than remedies and he sought assurance about information sharing. It was confirmed that the appropriate systems were in place and information was only shared when necessary. Early intervention was also discussed.

Dr Heather Gorringe questioned whether extra resources had been allocated to the Camp Hill initiative and made a comparison to Wembrook, which was worse statistically.

Deb Saunders pursued the point about partnership work with the three CCGs, suggesting attendance at Healthwatch, where all three CCGs were represented.

Resolved

That the Board:

- 1) notes the progress made on Priority Families and requests extra information on the impact on other services, costs and achievements.
- 2) extends its thanks to all partners so far involved in the management, coordination and delivery of the Programme.

4. Smoking in Pregnancy – “Upping Our Game”

Dr. Linnane reported that smoking in pregnancy levels in Warwickshire were unacceptably high. An initiative to address this was the tobacco Control Declaration, signed by the Board on 17th July 2013. It is intended to produce a simple fact sheet and engage partner organisations. The need for a clear assessment of the problem and training were other issues reported.

It was noted smoking by expectant mothers affected 1 in 6 unborn babies. The Department of Health had acknowledged its own targets wouldn't be achieved. All agencies acknowledged the issues faced, but were struggling to make an impact. An action plan had been developed, which was appended to the report and partners were thanked for their input to it. The need for more accurate data and more effective carbon monoxide testing were also raised. It was planned to form a steering group and periodic updates would be provided to the Board.

Gillian Roache referred to the work of District and Borough Councils on smoking generally.

Resolved

That the Warwickshire Health and Wellbeing Board:

- 1) Agrees that the reduction of smoking in pregnancy is one of its key priorities.
- 2) Endorses the proposed actions to reduce the harm from women smoking during pregnancy.
- 3) Requests partner agencies to participate in the delivery of a detailed action plan.

5. Winter Pressures & Feel Well in Winter Campaign – Agencies Working Together and Building Resilience

Dr John Linnane introduced this item, to explain the arrangements in place for the coming winter months. The report included sections on winter resilience in health and social care, upstream resilience and the seasonal flu vaccination campaign.

Dr Linnane spoke about the campaign, for which a launch was planned and about flu vaccinations, including the plans to build upon the previous year's good practice. Flu vaccinations would be available from local pharmacists. Exercises and scenarios were planned to prepare for the issues that occurred over winter. A specific example was the hand wash campaign to address known issues like the novo virus.

Councillor Bob Stevens stressed the need to look after elderly neighbours in bad weather, issues associated with slips and falls and the need to engage communities. This point was echoed by the Chair, who recognised the positive outcomes from previous efforts to engage communities. It was confirmed that accident and emergency services were prepared with increased consultant and nursing staff levels. Councillor Gillian Roache referred to rising fuel costs. In Stratford there was a reliance on heating oil which didn't get the same media coverage in terms of cost rises, as gas and electricity costs. Reference was made

to an initiative through the Warwickshire Rural Community Council, for oil purchase at lower costs and it was requested that this information be circulated.

Resolved

That the Warwickshire Health and Wellbeing Board:

- 1) Notes that adequate major incident, winter pressures response and business continuity plans are in place and tested for the winter.
- 2) Will promote uptake of seasonal flu vaccination among any staff who are in clinical risk groups, and employed health and social care staff who provide direct personal care.

6. Autism Strategy and Self-Assessment Framework (SAF)

Chris Lewington (Head of Strategic Commissioning, Warwickshire County Council) presented this report. The Department of Health requested that each local authority complete a second self-assessment, to mark progress on the implementation of the 2010 Adult Autism Strategy. It was recommended that the content of the SAF be discussed at the local Health and Wellbeing board prior to end of January 2014. The report set out the purpose of the self-assessment completed, the process undertaken and Warwickshire's response.

Chris Lewington explained the purpose of the assessment, noting that significant progress had been made to date. She outlined the areas where more work was needed, particularly around data collection and engaging with housing colleagues and those working in criminal justice. The Health and Wellbeing Board was well placed to retain an overview of the Autism Strategy. The Chair advised that she had received a lot of correspondence on this important issue. She was pleased with the direction of travel. Deb Saunders also endorsed the positive feedback.

Resolved

That the update on the Autism Strategy and Self-Assessment Framework is noted.

That the Board extends its thanks to Chris for leading a multi agency initiative to such positive outcome

7. CCG Commissioning Intentions – Feedback from the Workshop on 30th October 2013 and the Board’s Approval

Dr. John Linnane addressed the Board, referring to the circulated report and particularly a chart which compared priorities against the actions of partner agencies. There was a commitment to a range of priorities designed to improve the health and wellbeing of Warwickshire residents. He felt it important that there was a clear, unanimous message from the Board on this commitment.

With reference to the report recommendation on strengthening collaboration, the chief executives of district and borough councils wanted to be involved where they are commissioning services relevant to Health and wellbeing. Brian Hanford reminded of the commissioning role of NHS England, which would also like to be involved in the process. The Chair felt that the good progress made should be publicised. Councillor Bob Stevens added that the key was monitoring implementation. WF reported on the People Group outcomes framework that will facilitate monitoring the delivery of health and wellbeing improvements and commended its use to the board. Councillor Gillian Roache complemented the report and acknowledged the different weight each CCG would give to localised priorities, which was appropriate to meet needs in their respective areas. She also stated the need to share good practice throughout the County.

Resolved

That the Warwickshire Health and Wellbeing Board:

- 1) approves the commissioning intentions of:
 - Warwickshire North CCG
 - Coventry and Rugby CCG
 - South Warwickshire CCG
 - WCC Social Care and Public Health
- 2) supports Commissioners’ new approach of commissioning by outcomes, monitors the progress on the implementation of the commissioning plans and holds Commissioners to account
- 3) strengthens collaboration and requests partners, including local councils to identify their commissioning intentions.

8. Integration and the Transformation Fund

(a) The Way Forward in Warwickshire

A report was circulated, which Councillor Angela Warner and Chris Norton spoke to. A core function of Health and Wellbeing Boards was to

promote integration. Linked to this, an Integration Transformation Fund (ITF) will be made available from 2015/16. The distribution of funding was reported. In part this will be influenced by progress made by CCGs and councils in working together. Details of the national conditions that would need to be addressed in local ITF plans were provided, together with the proposed way forward in Warwickshire.

Integration was being progressed through the Joint Commissioning board – a WCC and CCGs officer steering group to inform a draft ITF plan that would be produced by January. There were plans for a joint workshop in December, and an event to be facilitated by Public Health and NHS England area team in January and an extraordinary Board Meeting on 11th February, to sign off the final plan. CCGs governing bodies and WCC Cabinet will agree the final plan in January.

A question about possible conflicts of interest was submitted. Further points concerned commissioning guidance, future funding arrangements and the potential need to rethink how the partners worked together. Wendy Fabbro provided reassurance that joint work around governance arrangements was already taking place. This was a complex process, but there was an absolute commitment to serve the whole of health and social care. David Spraggett explained that the £35m of resources involved wasn't additional money, but a redistribution of money that was currently spent elsewhere. Other speakers considered it a virtual fund to further health and wellbeing aims and touched on funding needed for disabled facility grants to help people live independently, for longer.

Resolved

That the Warwickshire Health and Wellbeing Board notes the report.

(b) RE-ablement s256 Fund – Budget Transfer Update

A report was presented by Chris Norton on the funding transfer to Warwickshire County Council. By way of introduction, it reminded of the significant funding transfers to social care, in order to benefit health, via a Section 256 agreement, under the 2006 NHS Act. The report included sections on the purpose of the transfer, the spending proposals and outcomes. The monitoring arrangements, links to JSNA and current commissioning plans were also reported.

Chris Norton provided a verbal update on the feedback received to the draft agreement and sought the Board's approval to a number of minor changes.

Resolved

That the Health and Wellbeing Board approves the proposed uses of this money and approves the Section 256 Agreement set out in Appendix 1, subject to the reported changes.

9. Children's Safeguarding Board Report

Cornelia Heaney (Safeguarding Children's Board Development) presented the Warwickshire Safeguarding Children's Board Annual Report for 2013. She gave an outline of the document's content, which included a local background, the statutory and legislative context and a section on governance arrangements. It reported progress against strategic objectives and the effectiveness of the safeguarding children arrangements, together with the Business Plan for 2013-14. Cornelia Heaney touched on the areas of work relevant to the Health and Wellbeing Board. There had been a small reduction in the numbers of children being referred for protection related issues. Reference was made to the percentage of referrals that resulted in Common Assessment Framework intervention(CAFs). The Child sexual Exploitation Strategy was another area raised.

Questions were submitted and responses provided about the work being undertaken, the need to avoid duplication in provision and troubled families intervention. Discussion took place about the low numbers of health referrals on child protection and CAFs, which must be an area for further work. A suggestion was made that the health sub groups provide a report to a future Board meeting on this. Also, it would be interesting to see comparative data for neighbouring areas. The Chair spoke about a recent conference, where a presentation had been received about child sex exploitation issues in Oxford. With regard to the circulated document, Councillor Gillian Roache suggested the addition of a column showing actions that had been completed.

Dara Lloyd Manager (Panel Manager, Child Death Review) then spoke about the work of the Child Death Review Panel. This was a sub-panel of the Safeguarding Board, which shared knowledge and reviewed every case of child death. The Panel's Annual Report had been submitted to the Safeguarding Board in September and circulated for the Board's information. An overview was given of the document, with particular reference to a key element on sudden infant death syndrome. Dara Lloyd explained the contributory factors to this syndrome and a planned campaign to raise awareness on procedures for safe sleeping. Funding was being sought for this aspect of the Panel's work.

Resolved

That the Warwickshire Health and Wellbeing Board notes the report.

10. Any Other Business

The Chair referred to the first issue of the Health and Wellbeing Board newsletter.

She explained that correspondence had been received from the Leaders of Stratford, Redditch and Bromsgrove councils, seeking the Board's support to the campaign to save the Alexandra Hospital. Whilst the Hospital is located in Worcestershire, it served several communities in Warwickshire. Officers will be asked to circulate this information for the Board's feedback. This situation was being monitored closely and there were potentially positive and negative issues that would arise if the Alexandra Hospital was closed. Wendy Fabbro spoke about the level of referrals each month and the need for a considered view, because people diverted to Warwick would get access to the 'discharge to assess' scheme not available from the Alex. Dr Linnane noted that the Overview and Scrutiny Committee had been looking at this issue for some time. He gave statistics on the numbers of outpatient and emergency admissions. There were potentially significant implications for some Warwickshire residents, especially in Stratford. Ann Mawdsley confirmed that the Worcestershire Health Overview and Scrutiny Committee would consider the recommendations at its December meeting and the Warwickshire ASCHOSC would be closely involved. Brian Hanford confirmed that NHS England would be consulted as part of any formal process and Martin Lee could report back to the Board.

Reference was also made to the joint Memorandum of Understanding (MoU) and the session to be held on 26th November, to apply the MoU to the Francis recommendations.

The meeting rose at 15.45

.....Chair