

## **Minutes of the Meeting of the Warwickshire Health and Wellbeing Board held on 15<sup>th</sup> July 2014.**

### **Present:-**

#### Warwickshire County Councillors

Councillor John Beaumont  
Councillor Jose Compton  
Councillor Bob Stevens

#### Clinical Commissioning Groups

Andrea Green (Warwickshire North CCG)  
Dr Adrian Canale-Parola (Coventry and Rugby CCG)  
Dr David Spraggett (South Warwickshire CCG)

#### Warwickshire County Council Officers

Monica Fogarty – Strategic Director, Communities  
Dr. John Linnane – Director of Public Health

#### Healthwatch Warwickshire

Phil Robson – Chair

#### Borough/District Councillors

Councillor Michael Coker (Warwick District Council)  
Councillor Belinda Garcia (Rugby Borough Council)  
Councillor Neil Phillips (Nuneaton and Bedworth Borough Council)  
Councillor Derek Pickard (North Warwickshire Borough Council)

### **1. (1) Appointment of Chair for the Meeting**

In the absence of the Chair, Councillor Jose Compton proposed that Councillor Bob Stevens chair the meeting and was seconded by Dr John Linnane. There were no other nominations.

#### **Resolved**

That Councillor Bob Stevens be appointed chair for the meeting.

## (2) Apologies for Absence

Councillor Izzi Seccombe (Chair)  
Karen Ashby (Warwickshire North CCG)  
Wendy Fabbro (Warwickshire County Council)  
Councillor Gillian Roache (Stratford District Council)  
David Williams (NHS England)

## (3) Appointment of Board Members

The Health and Wellbeing Board accepted the appointments of:

Councillor Belinda Garcia (Rugby Borough Council)  
Councillor Neil Phillips (Nuneaton and Bedworth Borough Council)  
Phil Robson (Healthwatch Warwickshire)  
David Williams (NHS England)

## (4) 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.

## (5) Minutes of the meeting held on 21st May 2014 and matters arising.

The Minutes were agreed as a true record, subject to a change to Minute No.2 on the Better Care Fund. It had been agreed to include Councillor John Beaumont (WCC) in the member consultation group to determine mechanisms for member input on the Better Care Fund.

## **2. Better Care Fund Progress Report**

Chris Lewington, Head of Strategic Commissioning at Warwickshire County Council reminded of the previous reports to the Board and advised that the arrangements for the Better Care Fund (BCF) were changing rapidly.

NHS England (NHSE) had written to all clinical commissioning groups (CCGs) to request further information and the resubmission of operational plans to ensure compliance with recent guidance. The areas that NHSE wanted assurance on from CCGs and the Board were set out in the report, together with the actions taken by Warwickshire partners to date, to respond.

Reference was made to the 'fast track' implementation of Better Care initiatives and the very tight timescales to meet changes introduced by the Department of Health. Following discussions with the Board's Chair and the CCGs, it had been determined these timescales could not be achieved. An outline was given of the plans for stakeholder engagement and the completion of the BCF submission process with the Board's approval to the final proposals being sought in September or October 2014. It was stressed that Better Care was the vehicle for integration of services and not just about the BCF.

Two CCG workshops had been held recently and there were plans for a further CCG workshop. Another recent change to the guidance was the introduction of a performance element and targets, which could see the redirection of funds to CCGs for acute services, if performance levels were below a set threshold. Further discussions on proposed target levels would be needed with each CCG.

A question was submitted about how this would be articulated in service delivery to patients. In reply, the Board was reminded of the patient-centred approach, the aim for relevant records to be available to all service providers, the use of integrated teams crossing health and social care services and aims for earlier intervention.

For Healthwatch, it was difficult to comment on the high level plans and they would need to see the detail, to be able to contribute on behalf of consumers. There were planned events and communications work to inform on the detail, which would take place in August 2014.

### **Resolved**

That the Board notes the progress report.

## **3. Children & Families Act 2014 - Briefing**

Hugh Disley, Head of Service for Early Intervention (WCC) presented a report which informed the Board of the key changes from this legislation. The Children & Families Act 2014 is wide ranging and comprises ten parts. The report focussed on changes to family justice, adoption changes, the welfare of children and a number of miscellaneous areas. Particular reference was made to special educational needs and disabilities (SEND). Mr Disley referred the Board to an appended series of 'key questions' and a structure chart showing the governance arrangements. He also focussed on the section of the report on joint readiness. A further report would come to the Board in December, after a period of consultation, at which time, the Board would be asked to consider if the checklist of key questions could be answered.

In response to questions about the SEND local offer and related consultation, further information was provided. It was clarified that the

local authority advise and support schools SENCO plans and this would continue with the new single plan. Further aspects raised were an assurance from CCG representatives that the health sector would be involved and the submission of an interim strategy to Cabinet in September.

### **Resolved**

That the Board notes of content of the report.

#### **4. Introduction to Multi Agency Safeguarding Hubs**

This item was deferred.

#### **5. The Care Act Going Forward – Implementation and Progress**

David Soley, Service Manager, Mental Health presented this item. The report focussed on Part 1 of the Care Act, which concerns care and support. The implementation timetable and deadlines were reported, showing progress achieved to date. The following areas would need to be implemented by 1<sup>st</sup> April 2015:

- Wellbeing
- Prevention
- Safeguarding Vulnerable Adults
- Transitions to Adulthood
- Information & Advice (including financial advice)
- Independent Advocacy
- Assessment - Care & Support Planning
- Carers – Assessment - Care & Support Planning

Key implementation activities over the period to 2016 were shown in a table and commentary was provided on the key implementation challenges ahead.

Mr Soley responded to questions from the Board. He spoke about the regulations due in October 2014, which would add detail and enable the County Council to understand fully the implications of the new duties. There was discussion about the involvement of GPs, service commissioners and providers, as well as the opportunity to improve patient pathways. A point was made that there was no additional funding for these duties. Finally, the potential for sanctions or judicial reviews was discussed.

## **Resolved**

That the Board notes the report.

## **6. Pharmaceutical Needs Assessment**

A report was presented by Rachel Robinson, of Public Health (WCC) on the Board's responsibilities in relation to Pharmaceutical Needs Assessments (PNA). Periodically, there was a requirement to publish supplementary statements explaining changes to service provision. The Board was asked to consider and approve PNA Supplementary Statement No.4, which had been circulated previously.

It was noted that a revised PNA would need to be published by 1<sup>st</sup> April 2015. Due to the timescales involved, Public Health had commissioned NHS Arden Commissioning Support (NHS ACS) to help develop the new PNA. Laurence Trester of NHS ACS was also present to respond to technical enquiries.

It was confirmed that the PNA would inform NHS England in its decisions about the location of future pharmacies, the services that would be required and hours of operation, to meet gaps in existing provision. Wide consultation was planned on the revised PNA over a 60-day period. Other points were made about the range of services that pharmacies could deliver, reducing reliance on acute services and about the healthy living pharmacy programme.

## **Resolved**

1. That the Warwickshire Health and Wellbeing Board approves PNA Supplementary Statement No.4.
2. That progress of the development of the new Warwickshire PNA is monitored by the Board.

## **7. Public Health Procurement Timetable**

Dr John Linnane , Director of Public Health, WCC gave an update on the joint tender for sexual health services, the transfer of health visitors and family nurses to Public Health in October 2015 and the weight management and exercise on referral contracts.

Dr Linnane clarified the elements of the weight management contract that Public Health commissioned and the signposting to other services that also took place. There was also discussion about the transfer of

health visitors, the transition board established to oversee this process and a suggestion was made that a primary care clinician be invited to join that board.

**Resolved**

That the Board notes the report.

**8. Progress on Health and Wellbeing Strategy**

Nicola Wright, Consultant, Wider Determinants of Health, Public Health, WCC provided a verbal update on the pre-consultation work on the Health and Wellbeing Strategy, completed over the previous 2 months. She outlined the themes proposed for the new Strategy and the feedback received to date from respondents. Views were sought on the size of the final strategy document and there seemed a consensus for a document of about 10 pages in length. Board members were reminded that the next workshop to progress the Strategy was scheduled for 1<sup>st</sup> September 2014. Thereafter, the draft strategy would be considered at the Adult Social Care and Health Overview and Scrutiny Committee, before final consideration at the Board's meeting on 19<sup>th</sup> November.

**Resolved**

That the Board notes the report.

**9. Headlines from the Planning for Healthier Communities Event**

Nicola Wright provided a verbal report on the Planning for Healthier Communities event held at Stoneleigh on 10<sup>th</sup> July. It had provided a useful opportunity for relationship building, enabling discussions between key partners on healthier communities initiatives, regeneration and development. A number of pledges had been made by participants, for example to take into consideration health needs when determining applications for development. Reassuring feedback had been received from Public Health England on the approach being taken in Warwickshire.

**Resolved**

That the Board notes the report.

## **10. Any Other Business**

The Chair invited Philip Bushell-Matthews of the Coventry and Warwickshire Partnership Trust (CWPT) to address the Board. Those present were encouraged to become members of CWPT and further information would be circulated by email.

The meeting rose at 15.00

.....Chair