# Minutes of the Meeting of the Shadow Warwickshire Health and Wellbeing Board held on 28<sup>th</sup> September 2011

#### Present:-

#### Warwickshire County Councillors

Councillor Alan Farnell Councillor Bob Stevens Councillor Izzi Seccombe

#### **GP** Consortia

Dr David Spraggett -South Warwickshire Dr Charlotte Gath – Rugby CCG Dr Kiran Singh – North Warwickshire CCG

#### Warwickshire County Council Officers

Marion Davis – Strategic Director of Children, Young People and Families

#### NHS Warwickshire

Bryan Stoten - Chair of NHS Warwickshire John Linnane - Director of Public Health Stephen Jones - Chief Executive Arden Cluster

#### Borough/District Councillors

Councillor Bill Sheppard – Nuneaton and Bedworth Borough Council

#### Warwickshire LINk

Councillor Jerry Roodhouse

#### Others Present

Mike Caley – NHS Warwickshire
Sue Davies – Chief Operating Officer, Rugby CCG
Gareth Owens, Executive Director Nuneaton and Bedworth Borough Council
Monica Fogarty, Strategic Director – Communities Group
Kate Nash, Head of Partnerships - WCC
Paul Williams – Democratic Services Team Leader – WCC

#### 1. General

#### (1) Apologies for absence

Dr Inayat Ullah - Nuneaton and Bedworth Wendy Fabbro - Strategic Director - People Group, WCC Lorna Shaw – Local Government Improvement and Development Agency

Liam Hughes - Local Government Improvement and Development Agency

Councillor Derek Pickard – North Warwickshire Borough Council Glen Charman - Chief Operating Officer, North Warwickshire Clinical Commissioning Group

#### (2) Member's Declarations of Personal and Prejudicial Interest

None

#### (3) Minutes of the Meeting on 15 July 2011 and Matters Arising

The minutes were agreed by the board and signed by the Chair. There were no matters arising.

The Chair opened the meeting by observing that progress with the development of the Board and its work had been good. He stated that if the Board was to engage with the public it would be necessary to "listen and respond" rather than merely "present".

# 2. The Health and Wellbeing Board Strategy – Emerging Themes

Mike Caley introduced this item. He informed the meeting that a small subgroup had been established to develop the strategy. This had been made more challenging by the absence of any guidance from government. The working group has agreed that the strategy should,

- Encompass public health
- Use the JSNA
- Be clear and precise
- Be accessible to the public and
- Take account of the views of community groups
- Use the outcomes from the Marmot Review

It is clear that not enough resource is being put into prevention or community health. There are too many people in hospital and too many health inequalities.

The subgroup had discussed the role of education in improving health outcomes but no conclusion had been reached on how far this debate should extend. Housing and leisure facilities were seen as key to good health. Councillor Roodhouse noted that people's aspirations have a link to achievement and health. He also asked that the future role of Healthwatch should not be overlooked.

The Board agreed that the strategy should not contain any local targets.

The intentions of the commissioning groups will need to be fed into the strategy. It should also include a statement on how the Board regards health provision across the county.

The role of Community Forums in gathering people's views was acknowledged although it was recognised that they are not totally representative of community views.

The Chair suggested that the strategy should look more at community care and social care than the provision of hospital beds. The observation was also made that if there is to be a move to community care then ambulatory services will need to be enhanced.

The Board then debated the extent to which the acute providers should be invited to engage in the process of developing the strategy.

The discussion turned briefly to membership of the Board. It was noted that the Probation Service and representatives from the voluntary sector had expressed an interest in joining. In addition the Chief Executive of the George Eliot Hospital had written expressing a desire to engage with the Board. It was agreed that the Chair should write to the Chief executives of the acute trusts explaining the need to limit the size of the Board whilst at the same time stating that they will be invited to attend Board meetings on the basis of need.

In summary Mike Caley stated that the key to the strategy is to get he challenges right. Once that is achieved the rest will follow.

It is expected that the first draft of the strategy will be produced in January 2012 with the final version being published in March 2012.

## 3. The Board's Communication and Engagement Plan

The Board was informed that concern had been raised that the role of district and borough councils as partners on the Board is not adequately reflected in the document. In addition the view was expressed that it is not yet clear what the plan is intended to achieve or who it is aimed at.

The Chair felt that the plan does not reflect the level of work being done adding that further input is required from Public Health.

It was agreed that the plan represents good progress and that it should be referred back with a request that it be revised and brought back to a future meeting.

# 4. The Process for Developing the Joint Strategic Needs Assessment

John Linnane explained that the launch date of the JSNA had been delayed due to difficulties with the technology associated with it.

All community forums will consulted on the JSNA and key messages from that exercise will be brought to the November meeting of the Board.

The Board agreed that whatever process is followed the JSNA must be used to inform the development of the Board's strategy.

### 5. Draft Board Development Plan

Kate Nash stated that the early draft of the programme had been developed with Lorna Shaw from the Local Government Improvement and Development Agency. The following points were made by the Board.

- The training sessions identified should be used not only to develop the understanding of the participants but also the work of the Board.
- It will be necessary in the plan to articulate the role of Public Health
- For module one of the programme the district and borough councils along with Healthwatch should be invited. (Healthwatch will not only provide a challenge it will also bring the voices of the wider community along to the debate).
- The development plan will need to embrace some of the bigger issues that might not normally make it onto the Board agenda eg cultural differences between health and local authorities.
- The programme should include social care issues such as safeguarding.

# 6. Assessing Current Thinking on the Future Health and Wellbeing Agenda

The Chair opened this item by reminding the Board of the earlier discussion concerning the role of the district and borough councils. Councillor Bill Sheppard suggested that just as with the acute trusts it might be necessary to invite the councils along to meetings of the Board as necessary.

Mike Caley raised the issue of reviewing the plans of the clinical commissioning groups adding that each would each need consideration by the Board. It was agreed that this should be included on the agenda for the November meeting of the Board.

Councillor Farnell suggested that the Board should develop a link with the Local Enterprise Partnership. It was agreed that the Board should nominate a person to work with the LEP. This liaison could include discussion around the development of hi-tech medical industries.

Mike Caley informed the meeting of the proposal to invite Nicholas Bosanquet (Professor of Health Policy, Imperial College) to a future meeting.

The Chair informed the meeting of the North Yorkshire and York Independent Review. It was agreed that this would be circulated to the Board.

### 7. Any other Business

Marion Davis informed the meeting of progress with the Children's Trust. It was agreed that Wendy Fabbro and Councillor Timms should be invited to present a full update to the November meeting.

Charlotte Gath and Cllr Seccombe agreed to attend and contribute to the national learning sets being organised by the Department of Health

The Chair reminded the Board of the upcoming Healthwatch stakeholder event.

#### **Dates of future Meetings**

Thurs 10th Nov	12.15pm - 2.15pm	- Conference Room, Northgate House
Thurs Jan 19th	12.15pm - 2.15pm	- Conference Room, Northgate House

The meeting rose at 2.12pm

.....Chair