

Minutes of the Meeting of the Shadow Health and Wellbeing Board held on 15 July 2011

Present:-

Warwickshire County Councillors

Councillor Alan Farnell
Councillor Bob Stevens
Councillor Claire Watson (Representing Councillor Izzi Seccombe)

GP Consortia

Dr Inayat Ullah - Nuneaton and Bedworth
Dr David Spraggett -South Warwickshire

Warwickshire County Council Officers

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

NHS Warwickshire

Bryan Stoten - Chair of NHS Warwickshire
John Linnane - Director of Public Health

Borough/District Councillors

Councillor Bill Sheppard – Nuneaton and Bedworth Borough Council

Others Present

Gareth Owens, Executive Director Nuneaton and Bedworth Borough Council
Monica Fogarty, Strategic Director – Communities Group
Kate Nash, Head of Community Safety and Localities - WCC
Paul Williams – Democratic Services Team Leader – WCC
Lorna Shaw – Local Government Improvement and Development Agency
Richard Hancox – Nuneaton and Bedworth Clinical Commissioning Group
Kiri Gray – NHS Warwickshire
Cat Parker – Coventry City Council

1. General

(1) Apologies for absence

Dr Charlotte Gath – Rugby GP Consortium
Dr Kiran Singh – North Warwickshire GP Consortium
Councillor Jerry Roodhouse - LINK
Stephen Jones – Chief Executive NHS Warwickshire

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

None

(3) Minutes of the Meeting on 11 March 2011 and Matters Arising

The minutes were agreed by the board and signed by the Chair

2. NHS Future Forum report/Command Paper and implications for Health and Wellbeing Board

The Chair introduced this item. He explained the basis for the pause in the legislation and outlined some of the changes that have resulted from the exercise. These include a revision to the duty of the Secretary of State and amendments to the role of Monitor. A significant change for the Health and Wellbeing Board is that it is now seen as a key element of strategic commissioning.

Turning to the Command Paper (the title of which has met with resistance) the Chair stated that it emphasises the role of the public health agenda and the Health and Wellbeing Board. John Linnane introduced an eight page summary of the latest public health document from the Department of Health. It was agreed that this would be circulated to those members of the board not present. This document called for a greater recognition of the role of public health in bringing the system together. It reaffirmed the responsibility of local authorities in terms of health protection and support for GP consortia.

The meeting was informed that any suitably qualified provider will be permitted to bid for a service.

There was a general feeling that the latest announcements were good news for the Health and Wellbeing Board.

3. Joint Commissioning

Wendy Fabbro gave a powerpoint presentation to the board. She talked about the need to be aware of the impact of personalisation in that it will make all service users into commissioners. Effective commissioning is about outcomes but collectively professionals are not good about sharing intelligence.

(Copies of Wendy's presentation are available on request).

Following the presentation members of the board were invited to answer in their tables a number of questions. These are summarised here.

- It is important to share information using a common language.

- The use of the resource directory should be optimised.
- There is a need for a detailed map of who does what and where. This will avoid gaps and duplication.
- Criteria should be established to ensure value for money.
- Frontline workers should receive training and information.
- Collaboration between partners should always be the default position.
- Priorities should be i) care for the elderly and ii) CAMHS
- An early component of commissioning should be an examination of contracts coming up for renewal.
- Community Services are key.
- There is a need for collocation, a one stop shop approach and greater use of IT.

Using the Rugby Radio Mast Site as an example the Chair said that there is a need to plan well ahead. The point was also made that contracts will need to be considered with Coventry and they will only be satisfactory if care pathways are understood.

The meeting agreed that no one approach will meet all needs. It will be preferable to consider some matters at a local level (using small groups) whilst others should be considered on a more strategic level. It was stressed that the functioning unit will be the commissioning group and not the federation.

The Chair ended this item by referring to budgets and the need in the future to consider these jointly. The board agreed that this should be the next stage.

4. Development of Health Watch

Nick Gower-Johnson provided a résumé of progress to date with the development of Health Watch. He emphasised that this is a new initiative and is not simply a re-badging of previous structures such as PPI Forums and LINKs. He noted that no funds had yet been forthcoming from the government to support it.

The point was made that Health Watch should be as inclusive as possible not merely listening to those who shout the loudest. The Department of Health is keen to ensure that Health Watch is as inclusive as possible. We need to communicate more with the public including young people whilst currently active LINK members will need to be used rather than cast aside.

The main message coming from the board therefore was that communication and engagement with the public will be the key to success with this new initiative.

Nick was thanked for his time and it was agreed that he should return to update the Board in the future.

5. Developing the Health and Wellbeing Strategy

Monica Fogarty presented this item and started by emphasising the connections between the NHS, social care, public health and other sectors such as housing.

She pointed out that whilst there is a statutory duty to produce the strategy no guidance had been forthcoming on what it should contain. There is no need to submit the strategy for public consultation but it is likely that there will be a role for scrutiny. The draft strategy will be needed by January of next year and in March 2012 it should be agreed.

It was agreed that a group should be set up to draft the strategy and a general request was made for volunteers to join it.

6. Any other Business

Marion Davies informed the board that the government had responded to the Munro report. The response can be found here.

<http://www.education.gov.uk/inthenews/inthenews/a00192081/government-responds-to-the-munro-review-of-child-protection>

Regarding the clustering of PCTs the Chair informed the meeting that Sir David Nicholson had recommended agreement on a single operating model with one Chair and one group of executive directors. SHAs are also being clustered.

Finally it was agreed that the Chief Executives and Chairs from the 3 acute trusts (George Eliot, South Warwickshire and UHCW) should be invited to a future meeting.

Date of Next Meeting 12pm Wednesday 28th September, Wedgnock House, Warwick

The meeting rose at 2.10pm

.....Chair