

Telford and Wrekin Health and Wellbeing Board (HWB)

25 April 2012 at 2.00pm

First Floor Meeting Room 1, Civic Offices, Telford

Key Decisions/Actions/Discussion:

Agenda Item	Discussion Points	Who
1.	<p>Attendees: Cllr Richard Overton (Chair and Deputy Leader TWC), Cllr Liz Clare (Cabinet Member: Adult & Social Care), Richard Partington (Managing Director TWC), Laura Johnston (Interim Director of Children & Family Services), Chris Weiner (Consultant in Public Health), Dr Mike Innes (Chair of T&W Clinical Commissioning Group), Dag Saunders (LINKS), Leigh Griffin (Deputy Chief Executive West Mercia PCT Cluster), Dylan Harrison (CCG Non-Executive Director), Clive Jones (TWC Assistant Director: Family and Cohesion Services), Clare Hall-Salter (TWC Partnership and Planning Manager), Paul Taylor (TWC Assistant Director: Social Care Specialist), Jon Power (Delivery and Planning Manager TWC), Helen Onions (Public Health Specialist), Paul Clifford (Corporate Director TWC) and Jayne Clarke (Democratic Services Support TWC)</p> <p>Apologies: Cllr Paul Watling (Cabinet Member: Children, Young People & Families), Karen Kalinowski (Assistant Director: Care and Support TWC), Dr Catherine Woodward (PCT Director of Public Health), David Evans (Chief Operating Officer T&W CCG)</p>	
2.	<p>Action notes 22.02.12:</p> <p>CHC update: Leigh Griffin gave an update on:</p> <ul style="list-style-type: none"> • Financial support; • Budget to be set at PCT national average for 2012/13; • Criteria to be monitored – an external perspective is needed • Formal agreement needed <p>SHWB Governance/TOR: Governance paper discussed at CCG Board, comments included:</p> <ul style="list-style-type: none"> • Need to avoid duplication of work and keep at a strategic level • Include health equalities consideration • Simple Quorum requirement needs refining to ensure adequate balance of representation <p>Cluster Model Update: Leigh Griffin gave an update on:</p> <ul style="list-style-type: none"> • Cluster Operating Model from April – one executive team serving 4 PCTs / 4 LAs / 4 HWBs • LG's role includes: Deputy Chief Executive of West Mercia NHS Cluster; Overseeing Public Health Transition across the cluster; National Commissioning Board transfer of services; Communication and Engagement across the 4 PCTs. There is no longer a Managing Director responsible for Shropshire and Telford and Wrekin. 	

	<p>Performance Queries: Leigh Griffin to come back to Board to resolve the queries.</p> <p>AOB Member Information Seminar to be held on 14th May 2012. All other actions have either been completed, were covered in the meeting or have been added to the forward plan and action notes were agreed.</p>	
3.	<p>Tobacco Control in Telford and Wrekin</p> <p>Dr Chris Weiner gave a brief overview of the key points on the health and economic impact of tobacco use, the national policy environment regarding tobacco control and the current Telford and Wrekin response to the delivery of improved tobacco control.</p> <p>There had been a huge improvement in the number of people smoking in our communities. During the last 10-15 years nicotine replacement had been key, but recently, over the last 2 years, more innovative work had been ongoing:</p> <ol style="list-style-type: none"> 1. The development of a Telford and Wrekin Tobacco Control Commissioning Partnership 2. The provision of high quality smoking cessation services <p>The Smoking Cessation Services had introduced a tariff based scheme in order to encourage people to quit. Despite the ongoing work there were still significant amounts of smokers within Telford and Wrekin area, around 30,000, with over 200 deaths per year. The estimated cost to Telford and Wrekin was around £50m per year. Smoking was a recognised priority and there was a lot of work to be undertaken over the next 10-15 years.</p> <p>A discussion took place including:</p> <ul style="list-style-type: none"> • Use of Peer Education • Smoking in Pregnancy, particularly teenage smokers • Involvement of the Retail Sector in the TCC Partnership • Quitting and re-starting rates and the tariff based scheme • Health benefits • Expanding the Partnership Membership – ie link to maternity and children’s services • Joining up with the Council – LJ will discuss directly with ChW (children’s centres, education, cohesion services) • Overspend and the recognition that this was “invest to save” • Possible conflicts of interest with providers <p><u>AGREED</u> – That the Health and Wellbeing Board supports:</p> <ol style="list-style-type: none"> 1. As a priority for the Telford and Wrekin community the local delivery of high quality and effective tobacco control measures; 2. The proposed terms of reference and governance arrangements for the Telford and Wrekin Tobacco Control Commissioning 	LJ/CW

	<p style="text-align: center;">Partnership</p> <p>3. In principle the continuation of a tariff based scheme for smoking cessation services post March 2013, subject to future funding availability</p>	
4.	<p>Joint Health and Wellbeing Strategy Emerging Priorities: Consultation Document:</p> <p>Jon Power presented a report on the Health & Wellbeing Strategy Emerging Priorities and Strategy, which must be in place by April 2013. A Health & Wellbeing Workshop had been held on 21st March and had identified 10 priority outcomes from the long list of priorities identified by the Joint Strategic Needs Assessment (JSNA). A draft consultation document had been produced which set out the proposed priority outcomes for the strategy, a vision for the strategy and Board and cross cutting principles which would underpin the work of the Board together with it's partners. The next step was to consult with service users, health and social care commissioners and providers and the wider community. This consultation would run until 20th July 2012 and would involve the proposed priority outcomes; identify if there were any missing outcomes; asset mapping and collate views on how services could be improved and better meet the needs of the service users. A meeting had been arranged for the 26th April to develop the programme and an update would be brought to the Health & Wellbeing Board on 13th June. It was hoped to present the draft strategy to the Board at the meeting on 12th September.</p> <p>It was suggested that a 'sponsor' from the Board for each of the proposed priority outcomes was sought.</p> <p>A discussion took place including:</p> <ul style="list-style-type: none"> • Signing off the Stakeholder Agreement • Dementia – not to be too rigid on an age specific approach • Low uptake on Cancer Screening • Aligning all coms and engagement <p>Cllr RO thanked the team for producing this so quickly.</p> <p>It was noted that Adult obesity and Substance Misuse / Risk Taking behaviour have not been included in the Short list Priorities for the JHWS – JP/HO to look into this further</p> <p><u>AGREED</u> – that the Board:</p> <ul style="list-style-type: none"> • endorse the proposed consultation document with particular reference to the <ul style="list-style-type: none"> - 'Vision' Statement - 'Priority Outcomes' - Cross cutting principles; • endorse the proposal for the Chair of the Board and the Director 	JP/HO

	<p>of Adult Social Services to agree the stakeholder engagement programme;</p> <ul style="list-style-type: none"> agree the following ‘sponsors’ for each of the proposed priority outcomes: <p>Reducing excess weight in children (LJ/CJ) Reducing Teenage Pregnancy (CJ/LJ) Improving emotional Health and Wellbeing (CCG) Supporting people with Autism (CJ/KK) Reducing the number of people who smoke (CW) Ensuring people have a positive experience of health and care services (CCG/KK) Improving carer’ health and wellbeing (KK/CJ) Supporting people to live independently (KK) Improving life expectancy and reduce health inequalities (CCG) Supporting people with dementia (KK)</p> <p>Further report to Health & Wellbeing Board on 13th June. Draft strategy to the Board on 12th September.</p>	<p>JP/HO JP/HO</p>
<p>5.</p>	<p>Clinical Commissioning Group (CCG) Authorisation: Approval of Further Documentation:</p> <p>Mike Innes gave a brief overview on the Organisational Development Plan together with the 5 draft development documents. These documents sought to demonstrate that the Clinical Commissioning Group in Telford and Wrekin had the organisational capacity and competence to deliver its role. Within the Organisational Development Plan the CCG is asked to rate itself on a regular basis using the RAG (red, amber, green) Rating and changes to the documentation would be ongoing. It would match the national NHS operational plan and would look to deliver both national and HWB directives. The operational plan would be produced annually.</p> <p>The Governance Plan followed the corporate governance structure</p> <p>Communications and Engagement Plan showed the broad range of people who needed to be engaged with as this was crucial to the CCG.</p> <p>Human Resources Plan followed the CCG structure although this needed to have Government approval.</p> <p>The financial plan showed that it had managed to stay within the running costs using the QIPP (Quality, Innovation, Productivity, Prevention) savings.</p> <p>The CCG Authorisation process involved submitting comprehensive documentary evidence which required a quick turn around. It was expected that the Board’s authorisation will be in ‘wave 2’ during November 2012 which would be on a par with other CCGs.</p>	

	<p>A discussion took place including:</p> <ul style="list-style-type: none"> • Engagement – the need to join up consultation exercises where possible • Job Descriptions • QIPP Plan • Freedom of Information requests / whistle-blowing <p><u>AGREED</u> - that the Clinical Commissioning Group Development Plans be noted.</p>	
6.	<p>Commissioning Arrangements:</p> <p>Paul Taylor, Mike Innes and Clive Jones gave a brief update on the Commissioning Arrangements from the last meeting. From the Local Authority’s perspective they were very pleased with the commissioning arrangements that had been proposed with the CCG and Karen Kalinowski and Clive Jones had started talks on the co-operative arrangements around most commissioning.</p> <p>A discussion took place including:</p> <ul style="list-style-type: none"> • Developing structures for CCG / staffing • CCG Chief Operating Officer from 8th May – David Evans • Authorisation process of Commissioning support organisations will be very stringent – Potential risk • Public Health Commissioning and link to the PH Transition Project 	
7.	<p>Public Health Transition Project Update:</p> <p>Paul Taylor gave an update on the Public Health Transition Project and the local arrangements which were to take forward the transition from the NHS to the Local Authority. The document set out governance arrangements and established 5 work streams to take forward the specific areas of work:</p> <ul style="list-style-type: none"> • Workforce/HR & Accommodation • Public Communication & Engagement • Contracting • Finance & Resources and Governance • Information Systems & Assurance <p>The work streams were launched on 13th March and had been tasked with scoping in detail the main tasks in order to achieve a successful transfer by April 2013. A follow-up meeting was scheduled for 27th April. Discussions around public health commissioning and wider changes were to take place and specific task and finish groups – eg emergency planning, in order to reassure the Board that good governance arrangements were in place.</p>	

	<p>A Discussion took place including:</p> <ul style="list-style-type: none"> • Financial Situation • Realistic approach to be taken - ie resources/capacity/priorities • Risk analysis <p><u>AGREED</u> -</p> <ul style="list-style-type: none"> • That the progress with respect to the transition plan and approach being taken be noted; • A further report is prepared for the Shadow Health and Wellbeing Board's June 2012 meeting to update on progress and seek approval for the approach to the development of a local T&W Vision for Public Health <p>Vision Paper to be brought to 13 June 2012 meeting</p>	PT
8.	<p>Public Health Outcomes Framework:</p> <p>Helen Onions presented a report on the Public Health Outcomes Framework.</p> <p>The aim of the framework was to promote joint working across the NHS, local government, the voluntary sector and communities and included outcomes relating to the population's health in its broadest sense. The framework overlapped that of the NHS Outcomes Framework and shared outcome measures with the CCG</p> <p>A discussion took place including:</p> <ul style="list-style-type: none"> • Shadow Health & Wellbeing board to keep an overview • Screening Programmes • Terms of Reference • Placeholder • Need to tie in with H&W Strategy to avoid overlap or gaps and streamline monitoring <p>AGREED – that the Shadow Health and Wellbeing Board:</p> <ul style="list-style-type: none"> • acknowledge that the public health outcomes framework covers population health and wellbeing in its broadest sense across the life course, and is not restricted to public health services; • recognise that the JSNA benchmarking process has compared the Telford and Wrekin position against the national average for many indicators in the public health outcomes indicators, where robust local authority level data are already available; • be assured that areas where local public health outcomes are already known to be poor have been included in the long list of priorities considered by the Board at the JHWS development workshop; • acknowledge that the public health outcomes framework will 	

	<p>strongly align to the performance outcomes framework for the JHWS, informing its development;</p> <ul style="list-style-type: none"> • note the performance summary for the existing public health targets which are monitored by West Mercia PCT Cluster Board and agree to receive further updates during the transition as relevant; • agree to receive further reports on the implications of the public health outcomes framework in Telford and Wrekin, once the full set of local authority data are public (expected Autumn 2012). 	
9.	<p>Proposed Future Agenda Items – noted:</p> <ul style="list-style-type: none"> • Approach to the development of the Public Health Vision • Shropshire Partners in Care – The Independent Sector’s role in delivering services • JSNA and Health and Wellbeing Strategy Development • Dementia Strategy update and progress • Carer’s Link Worker presentation • CAMHS review update • Efficiency Proposals – NHS Transformation • Approach to consultation and future engagement for stakeholders • Equity • Update on CCG Authorisation • PH Performance reports 	
10.	<p>Any other Business</p> <p>None</p> <p>This item would be removed from the Agenda for future meetings of the Board as they were now public meetings.</p>	
11.	<p>Dates of future meetings:</p> <p>HWB meeting 13th June 2012, 2pm – 4pm, VIP Suite, Civic Offices HWB meeting 12th September 2012, 2pm – 4pm, VIP Suite, Civic Offices HWB meeting 14th November 2012, 2pm – 4pm, VIP Suite, Civic Offices HWB meeting 23rd January 2013, 2pm – 4pm, venue TBC HWB meeting 13th March 2013, 2pm – 4pm, venue TBC</p>	

The meeting ended at 3.30pm

Signed

Dated