

HEALTH AND WELLBEING BOARD

Minutes of a meeting of the Health and Wellbeing Board held on Wednesday 10th June 2015 at 2.00pm in Meeting Room G3, Ground Floor, Addenbrooke House, Ironmasters Way, Telford TF3 4NT.

PRESENT: Cllr R Overton (Chair) (Telford and Wrekin Council), Dr M Innes (Vice-Chair) (Clinical Commissioning Group), Cllr A England (Telford and Wrekin Council), Cllr E Clare (Telford and Wrekin Council), Cllr K Blundell (Telford and Wrekin Council), Cllr J Seymour (Telford and Wrekin Council), Liz Noakes (Telford and Wrekin Council), J Chaplin (Healthwatch Telford and Wrekin), Cllr P Watling, (Telford and Wrekin Council), D Evans (Clinical Commissioning Group) P Taylor (Telford and Wrekin Council) and L Johnston (Telford and Wrekin Council)

Also Present: M Bennett (Head of Commissioning, Integrated Care), M Jhawar-Gill (Commissioning Specialist and Contracts Officer: Commissioning Vulnerable People: Family and Cohesion Services) and A Mason (Independent Chair: Telford Safeguarding Adults Board)

Officers: M Cumberbatch (Legal Services) J Power (Delivery & Planning Manager) and J Clarke (Democratic Services Officer).

The Chair welcomed and introduced Cllr K Blundell to the Health and Wellbeing Board.

Following the last meeting of the Board the Council with TACT had won a national LGC award for the development of the recovery orientated Drugs and Alcohol Strategy.

HWB-01 MINUTES

L Noakes asked the Board to note that the Commissioning intentions would need to be reviewed in year due to the announcement last week that £200m was being taken from the national Public Health Grant this year – this equated to 7% of the Council's budget which was £700K-£800k. The Public Health Team were currently looking at the impact that this may have.

Following a discussion it was:

RESOLVED – that the Minutes of the meetings of the Health and Wellbeing Board held on 11th March 2015 be confirmed and signed by the Chair subject to the following changes:

Page 2 – 6th paragraph “Emergency contraception services needed to be more uniform for patients and order that they were not confused with what was on offer” – replace “and” with “in”

Page 6 – HWB-37 Bullet Points – replace “IAX” with “IAPT”

Page 8 – HWB-39 2nd paragraph “Cllr England felt that he would only be consulted a Lead Member for Mental Health and not be consulted as a governor of the Trust. He wanted to ensure that there was a strong consultation process including the

foundation of the Trust” – replace “consulted a Lead” to “consulted as Lead” and “foundation of the Trust” to “Foundation Trust”.

P8 – HWB-39 – 5th paragraph – remove the word “was” from “. . . related piece of work was currently being undertaken . . .”

Page 11 – 9th paragraph – “It would not be possible to put forward and unaffordable option” – replace with “put forward an unaffordable option”.

Page 12 – 1st paragraph – “Mikes Innes confirmed the system of approach was a “bottom up” design and that the affordability was tested initially and once this had been established the quality of the officer was considered” - replace with “Mike Innes confirmed the system of approach was a “bottom up” design of the clinical model and that the affordability was tested independently once the quality of the offer had been established”.

Page 12 – HWB-42 – first Bullet points – replace “Early Health’s” with “Early Help”.

HWB-02 APOLOGIES FOR ABSENCE

Vicki Taylor (NHS England), J Tozer (Community Safety Partnership) and Dylan Harrison (Clinical Commissioning Group).

The Board were informed that Dawn Wickham, NHS England, was no longer in post. A substitute Member of the Board, Vicki Taylor, had been appointed

HWB-03 DECLARATIONS OF INTEREST

None

HWB-04 PUBLIC SPEAKING

No members of the public had registered to speak.

HWB-05 REVIEW OF THE TERMS OF REFERENCE OF THE HEALTH AND WELLBEING BOARD

M Cumberbatch presented the report on the Terms of Reference of the Health and Wellbeing Board. This was an opportunity to bring the Terms of Reference up to date and in line with current legislation and was considered good practice.

Several changes had been made to the Terms of Reference approximately 18 months ago where there had been changes to the HWB who now met 4 times per year. Changes to the quorum and the Board membership had also been incorporated, together with a general update following the transition from Shadow Board to full Board.

The report suggested no changes to the Terms of Reference at the present time as there had been no legislative changes. Prior to this year’s election the Government had announced changes to the local functions and a consultation exercise by the DCLG had taken place which closed on 6th March 2015. This new legislation would provide for Local Authorities to

delegate functions if they wished to. There were currently no further information on this legislation.

M Cumberbatch suggested that the Terms of Reference may need to be brought back to the Board later in the year if there were any developments with regard to the new legislation, but considered that there were no changes necessary at this stage.

Cllr J Seymour considered that the Terms of Reference were very wordy and repetitive. Although she understood the need for the depth of information it was requested that the Terms of Reference be set out with bullet pointed information for ease of reading. Cllr Seymour also queried if the Membership was politically balanced as following the election the balance of Members had changed and this would mean changes to the balance on the Board.

M Cumberbatch advised the Board that the regulation were very basic and quoted “at least 1 elected Member”. This Board membership did not follow the political balance rules. The decision with regard to allocation to the Board had been made by the Leader of the Council.

The Chair informed the Board that there was no statutory requirement to have opposition members on the Board, but that the Leader had wanted to make sure that the opposition had a voice on the Committee and had gifted seats to the Opposition Groups.

Cllr A England commented that he was frustrated that the Board did not drive enough change through co-operation and co-ordination. He was of the opinion that the Board could have an influence if they focussed their minds and he referenced points 7, 12 and 13 on Appendix 1 to the report.

Cllr L Clare commented that although the Board needed a comprehensive terms of reference she was also of the opinion that it may be useful to take out some information and also agreed that bullet points would be worthwhile considering.

P Taylor suggested that there would be a clearer idea of the Leadership Role once the national policy drivers had come forward.

M Cumberbatch suggested the Board consider the options with regard to the Terms of Reference and that he would consider the guidance and statute with regard to the political balance and continue to monitor changes to the legislation and any potential changes to the Board’s membership.

RESOLVED – that the Board confirm the Terms of Reference at Appendix 1 to the report.

HWB-06 HEALTH AND WELLBEING BOARD STRATEGY REFRESH – PROPOSED PROCESS

J Power presented the report on the Health and Wellbeing Strategy refresh.

The report outlined the proposed approach for reviewing and refreshing the current strategy which would expire at the end of March 2016.

A development session had been organised for the 23rd June where it was hoped that Members would attend, engage and develop a vision for the priorities of the Board which would be consulted upon during Summer 2015.

It had been recognised that since the adoption of the strategy in 2012/13, significant changes around health and social care had occurred including the introduction of the Care Act and the Better Care Fund. The strategy was due to be reviewed and was a good opportunity to ensure the strategy was relevant and focussed on priorities that individual partners were unable to progress alone.

The new strategy needed to be in place by 1st April 2016. It would be a 3 year strategy running from 2016/17 to 2018/19. Three key steps had been identified within the timescale which were:

- HWBB Development Session 23rd June 2015
 - Agree a small number of high level priorities for the Board which were aspirational, transformational and meaningful
- 6 Week Consultation Period 20th July - 30th August 2015
 - To be undertaken with key stakeholders (including CATPS), partners, service users, carers, staff and members of the public
- Draft Strategy
 - The strategy would include comments received as part of the consultation exercise and approved by the Board in December 2015

P Taylor informed the Board that a meeting had been held with David Evans and Richard Partington together with members of the CCG and Senior Officers of the Council. The discussion was around the vision, the governance arrangements and the challenges ahead. At this meeting it was agreed that 3 groups of officers would meet in June for discussions and it was asked if it would be possible, in order for these meetings to take place, to defer the HWBB Development Session from 23rd June for a month or so, which would enable the officer groups to bring the work undertaken to the Development Session. This would also mean that the public consultation would also need to be deferred to a later date but still with the aim of bringing the Strategy back to the Board in December 2015.

It was suggested to the Board that if required maybe there could be an additional or extra HWBB meeting.

J Power commented that the Board needed to make sure that any significant changes were considered collectively but that it would be possible to delay the development session as requested.

L Noakes suggested that this was a timely review process and that there was a need to focus on key priorities that really needed transformational change and that the Board needed to be in a position to be able to flexibly review priorities on an annual basis if required.

J Chaplin commented that a consultation process during the summer months ie July/August during the school holidays would not be beneficial and suggested that this took place in September/October.

Cllr L Clare agreed and added that the school holidays also had an impact on staffing levels. Cllr Clare also suggested that it was important to have the correct priorities in order to get the

right and proper outcomes and that maybe some priorities be discontinued and other priorities be brought on board.

D Evans gave his support to P Taylor's suggestion of deferring the workshop in June in order that the officer discussions be undertaken to establish a clear vision for both organisations and make suggestions around governance arrangements. It was also suggested that it was important to overcome any tensions to ensure the work of the Board and its partnerships rise to future challenges.

Cllr P Watling welcomed the opportunity to review the priorities in light of the changes to funding.

Cllr J Seymour also welcomed the comments due to the changes following the Care Act and the BCF and the importance of understanding this new legislation.

The Chair suggested that the recommendation be amended to "the next development session" and the consultation be undertaken in the Autumn.

Following the discussion it was:

RESOLVED – that:

- a) the proposed strategy refresh process be approved;**
- b) Board Members attend and engaged in the next Development Session which would focus on developing and agreeing a high level vision and priorities for the Board with consultation taking place in Autumn 2015; and**
- c) the draft 2016/17 – 2018/19 Strategy is presented to the Board on the 9th December 2015 for approval.**

HWB-07 AUTISM UPDATE – THE AUTISM STRATEGY 2014-2017 UPDATE AND THE AUTISM SELF-ASSESSMENT SUBMISSION (MARCH 2015)

P Taylor reported to the Board that Autism was a current priority of the Board and that the legislation with regard to this was still very young and only introduced in 2009. The legislation introduced the need for an Autism Strategy and Action Plan. The Department of Health check to see that these strategies and plans were being implemented and this has been done by introducing a strategy refresh in 2014 called "Think Autism". This work had been co-ordinated by M Jhavar-Gill and this had been signed off by the CCG and the Council. There was a national recommendation that the self-assessment should be reported to the Board in 2015. At 4.9 to the report the date should read January 2015 and not "2014".

Cllr J Seymour brought to the attention of the Board that the report referred to at 2.3 to the recommendations, the Autism Self-Assessment, was missing from the papers.

M Jhavar-Gill presented an update on the Autism Strategy 2014-2017 and the Autism Self-Assessment submission (March 2015). There were a number of new Commissioners, along with the CCG, working to refresh the Autism strategy. The Action Plan was slightly out of date and further work was to be undertaken. The Steering Group had previously been asked to focus on adults but now children and young people issues were incorporated into the Strategy. The Board were asked to note how the capital grant had been spent with regard to learning disability and confirmed that this would be under the responsibility of the Partnership

Board. A Task and Finish Group were undertaking work with regard to parent carers of adults with Autism and raising concerns regarding funding. A meeting was due to take place to re-assure the parent carers' funding was in place until 31st March 2016. Work was continuing despite a slight drop in funding, although this would be at a lower level. Any issues raised were being picked up under the wider consultation which included the parents of carers of children. The Board were asked to engage in the consultation which was due to end in August/September 2015.

P Taylor referred the Board to the self-assessment that had taken place during February/March and the consultation responses from service users and asked Manny Jhawar-Gill to take the Board through the main points.

Manny referred to the RAG ratings at items 4.10-4.12 to the report which were undertaken using strict assessment criteria. There were a number of Amber and Red areas which could be found at 4.12 to the report and these were used to assess the work at the time of submission. A training module had now been developed and was ready to be rolled out, although it was thought that this needed to be more "Telfordised" with anecdotal information from local people. The Ollie module for staff would be updated going forward for the wider training programme. With regard to the housing specific criteria, the housing strategy was split into distinct groups. Discussions with Commissioners would take place to look at housing for people with autism more broadly, but this was not specifically mentioned within the self-assessment. Work was taking place regarding data cleansing and data sources from the hub. This would help with forward planning for both the CCG and the Council who were keen to gain an insight into who uses the service and the types of service users. They would also look at reasonable adjustments that may need to be undertaken by wider employers and businesses, especially around kite marks and accreditations, in order to entice businesses to support placements and paid work.

The Chair asked if there had been any consultation with the Job Centre, Job Box or Job Junction?

M Jhawar –Gill commented that the assessment looked more broadly at this area.

Cllr A England thanked M Jhawar-Gill and all officers involved with this work and welcomed the report and actions. With regard to the red rating at 4.12 to the report Cllr England asked if there had been any engagement with the Criminal Justice System as he had found that people with a lack of capacity were often in court and sentenced with little comprehension as to what was happening. It was important to ensure that early intervention was in place for those people with a lack of capacity or no understanding of what they had done. It was suggested that a structure was put in place in order that these people were not criminalised.

Cllr P Watling suggested that Custody Suite Staff and the Youth Offending Service and Young People Services needed to have a better understanding of Autism especially with regard to the relationship these people had with authority figures.

Cllr J Seymour raised the point that this had been on the "to do" list for the Criminal Justice System for some years. Now that officers had identified this as an issue it was hoped that this would move forward more quickly. Cllr Seymour also asked for further information with regard to 4.5 at Annex 1 to the report.

M Jhawar-Gill confirmed that this was not necessarily a financial resource that was required. The Hub could help to deliver diagnoses. The diagnostic part of the process took approximately 3 hours but the Hub could be involved with the latter part and help with the

data collection around consultations and information around Autism together with future careers advice. The funding was supplemented by a capital grant and the contract had been awarded to "Listen not Label" who bid for the funding and were awarded the full amount in order to support the project with equipment and software. This would remain the property of the Local Authority and could be used as a resource for schools.

Cllr J Seymour asked about the expectations at Item 6 on Appendix 1 to the report.

L Johnston confirmed that West Mercia Youth Offending Service Board had drafted up a Youth Justice Plan for the wider West Mercia Service that included Telford and that she would look to establish the link between this work and that of the Plan.

It was asked if there was any data to show the size of the problem?

M Jhavar-Gill said that information highlighted in the Youth Justice Plan was used to understand the national landscape and was not based on Telford data.

Cllr A England queried who had been consulted on this work, ie Youth Offending Service, Probation Service? It was also suggested that consultation be undertaken with the CPS the Youth Service, Telford and Wrekin Council and the Police.

J Chaplin offered the services of Healthwatch who would be happy to talk to people and bring back the responses.

Cllr E Clare raised the issue of housing and the Red RAG rating at 4.12 to the report. Cllr Clare considered housing to be a real issue and queried whether there was any figures on housing waiting lists and what was available. She asked the Board if it needed to be realistic in its expectations. There had been a new development at High Mount in Donnington but these facilities were few and far between.

It was confirmed that feedback on the numbers would be circulated to Members of the Board and that there was another project being considered for lower level accommodation with support.

P Taylor reminded members of the Board with regard to the local development of specialist housing, although it was hoped to try and support people to live in their own home. Locally a high proportion of adults with learning difficulties were supported in residential care and the Board needed to look at alternatives, ie the developments such as the Extracare Housing Schemes. There had recently been a scheme in Ketley and there may be further schemes coming forward.

M Jhavar-Gill commented that the assessment had been looking more broadly at accommodation issues and the offer of tracking services and the issues of transition from residential schools in readiness for independent living. They were currently tracking 13/14 year old children in residential care in order to see the level of support and care needed for the child and the family. Any outcomes would be identified and incorporated into the wider piece of work.

M Innes recognised the challenging numbers at 3.1 of Appendix 1 of the report. The figures were difficult to predict. The figures were based on a predictive prevalence and more accurate data was needed in order to compare where they were in order to get a true picture of diagnoses.

M Jhavar-Gill confirmed that national prevalence data had been used and 30 adults had been assessed and there were at least 30 new cases.

M Innes suggested that any further reports were more clear on the numbers.

RESOLVED – that

- a) **the All Age Autism Strategy 2014-2017 and the accompanying Autism Action Plan to include progress against the action plan to date and to include the 15 Priority Challenges from Think Autism (DH 2014) be approved;**
- b) **overall governance for the Autism Strategy be with the Telford & Wrekin Learning Disabilities Partnership Board with the Health and Wellbeing Board receiving an annual report on progress, with a softer accountability to report to Aiming High and South Staffordshire, Shropshire and Telford & Wrekin Autism Partnership Board be confirmed; and**
- c) **how the Autism Capital Grant would be spent be noted.**

HWB-08 TELFORD AND WREKIN SAFEGUARDING ADULT BOARD: GOVERNANCE ARRANGEMENTS

A Mason presented the report on the Telford & Wrekin Safeguarding Adult Board Governance Arrangements.

Telford Safeguarding Adults Board had met for the first time in April 2015. Three sub-groups had been established which were:

- Quality, Performance & Operations (QPO)
- Partnership, Training, Learning & Development (PTLD)
- Service User Communication and Community Engagement (SUCCE)

Good progress was being made.

A Strategic Plan had been published without consultation which set priorities with wider partners and stakeholders and set out a plan until the end of the year. This was to look at the new requirements of the Care Act and this was going through the development stage. Suggestions and ideas were sought in order to work more effectively which may involve changes to Board Membership and sub-group membership. The Board ideally wanted to be structured and ambitious and improve outcomes and this would be moved forward in the first 6 months.

Cllr J Seymour commented that following the Groups being set up and the initial meetings, she was concerned about the amount of time taken up looking at cases which involved the Police, the CCG, Adult Safeguarding Manager and the Telford and Wrekin Board Manager and the amount of manpower that was required.

A Mason confirmed that the initial management support had been undertaken by a light admin structure and not from front-line staff and this was there to support the Panels, Boards and Sub-Groups and that this had been funded by the Council, CCG and the Police.

P Taylor confirmed to the Board that there had been no detrimental effect on services and resources within the Council's Safeguarding Team and with their workload. The Care Act came into effect in April 2015 which required Local Authorities to establish a statutory Safeguarding Adults Board, which needed an Independent Chair to oversee the quality of local safeguarding arrangements including the Council's responsibilities. The Chair was an additional cost but this was seen to be a positive in order to drive forward safeguarding. It was recognised that the previous Board was not fit for purpose and not delivering against the new agendas and a small resource had been needed to establish and service the Board. The Council received a small amount of additional funding (£16,000) which was given notionally for new safeguarding. The budget was currently £62,000 for support. Together with the £16,000 of additional new money, two statutory partners, the Police and the CCG, were to contribute £12,000 each so the additional cost would be just over £20K. This was something that should have been spent previously.

Cllr J Seymour asked if the Children's Safeguarding would still continue?

P Taylor confirmed that there was a 0.3 Manager Position, a 0.2 DASU/Local Authority Designated Officer (LADO) which would look at the synergies of Board Management roles and produce detailed guidance regarding the role.

Cllr J Seymour raised further concerns whether there was enough capacity.

A Mason commented that every Safeguarding Board would need to have an Independent Chair.

Cllr E Clare asked why Wrekin Housing Trust had been picked as a Board Member when there were other landlords out there?

A Mason replied that the Board wrote as widely as possible to landlords but that Wrekin Housing Trust were the only ones that showed an interest and were willing to attend.

Cllr E Clare asked who was representing the Trust?

P Taylor confirmed that it was Andrew Johnson.

A Mason confirmed that it was difficult to send people to the Board and they had nominated substitutes ie for items such as extracare facilities.

Cllr E Clare asked if the Board had closed agendas?

L Johnston confirmed that the Children's Board had closed meetings.

A Mason commented that the documents were available on the website as this was a public Agenda.

P Taylor confirmed that the Board itself did not deal with individual cases, only agreed serious case reviews. The terms and conditions of the Adult Safeguarding Board were statutory.

Following the discussion it was

RESOLVED – that

- a) the governance arrangements which were in place for the Telford & Wrekin Safeguarding Adults Board (TWSAB) were noted; and
- b) future updates would be provided on an annual basis – this would be used to present the TWSAB Annual Report (which included progress and achievements of the Board during the last 12 months).

HWB-09 BETTER CARE FUND UPDATE

M Bennett and C Jones presented an update on the Better Care Fund.

M Bennett confirmed that there had been progress on both the S75 and the work across the whole year. The funding work had brought together 5 Agreements into the S75 agreement and the S256 agreement. They were currently working through the Terms and Conditions and the Schedule in order that they could avoid conflict to help move forward and deliver health and social care within the legal document and framework. M Bennett did not want to underestimate how important it was to get the agreement signed off in order to avoid the risk of contract issues and performance issues. General agreement was in place although they were still working on areas such as service specifications. It was the intention that this work would be ready by the end of the month which was the end of the 1st quarter. A summary BCF progress report was presented – M Bennett described the different elements of the programme and that in the last quarter of 2014/15 the BCF target reduction in non-elective admissions had been met but that there had, however, been an increase in non-elective admissions in older people and that delayed transfers of care had reduced in the latter part of the year. With regard to patient experience, Age UK had been asked to carry out a process to get a clearer picture of patient experience and feedback from those with long term conditions and a stakeholder event would take place in July which had been extended to carers. More work around community understanding and caring at home was needed in order to improve independence, save money and reduce costs. The programme of work was ongoing.

M Bennett confirmed that 65+ was the challenge area with increasing rates of admissions and people staying in hospital longer. A more detailed analysis was needed as it was hard to say if a rapid response had been effective.

The Chair raised the issues around Delayed Transfers of Care (DTC) – there were no percentages in the figures about the causes of the delays.

M Bennett said that this could be added to the report. It was now easier to identify people who were being discharged earlier and that the delayed transfer numbers had reduced. These issues had been looked at over the last few months and a focus on length of stay had been undertaken.

The Chair asked if this was evidence based.

M Bennett said that there had been a lot of discussion and planning around this area.

D Evans agreed that it would be helpful to show the percentages as there may be controlling factors around A&E when people who were medically fit to be discharged had been delayed. This would show the benefits of being almost at target. Mr Evans thanked the staff involved who had worked very hard.

Cllr J Seymour welcomed the report as the work and improvements had shown results but she was disappointed that the BCF Board had cancelled two meetings. She wondered if there had been any underlying concerns, difficulty of attitudes or challenges. Cllr Seymour was concerned that money may be held back if targets were not met.

M Bennett confirmed that new dates had been circulated. He would circulate the dates in order to make sure Cllr Seymour was aware of these. Reports had been requested on workstreams and progress meetings were to take place with stakeholders.

C Jones confirmed that a need had been identified for the NHS, CCG and the Council to look at governance. This was currently being considered as a key issue alongside health and social care. They were currently taking stock and it was hoped that this work would be completed by the end of the month. Further changes would need to be made in order to work more smartly.

M Bennett informed the Board that an awful lot of work was happening, but that this was not as co-ordinated as he would have liked it to be. At 3.3.20 to the report, the diagram aimed to give an understanding around the work of the BCF and other non-BFC funded work that would contribute to the targets.

Cllr L Clare asked how the membership of the BCF Programme Management Board had been chosen.

M Bennett confirmed that Board had been set up on the 14th March and board members had been constituted from stakeholders with regard to the BCF Plan.

Cllr J Seymour confirmed that she had been chosen to be on the Board as the Board Sponsor for supporting people to live independently.

P Taylor praised the staff of the NHS and the Local Authority who were at the front end of the services. Something appeared to be working compared to other parts of the county. They had to abide by the BCF. He was pleased that this had now been simplified for the local service area. The "jigsaw" diagram described the whole of the Health and Social Care system not just the BCF pot. Telford and Wrekin needed to show leadership.

Following the discussion it was:

RESOLVED – that

- a) the progress of the Better Care Fund programme be noted;**
- b) the progress of the development of the Section 75 Pooled Budget Agreement be noted; and**
- c) that the respective organisation ensure that they support and facilitate approved BCF implementation within the identified timescales.**

The meeting ended at 3.42pm

Chairman:

Date: