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Dear Member

SHADOW HEALTH AND WELLBEING BOARD - MONDAY, 21 JANUARY 2013

I am now able to enclose, for consideration at the meeting of the Shadow Health and Wellbeing Board to be held on Monday, 21 January 2013, the following reports that were unavailable when the agenda was printed.

Agenda No	Item	Page
2.	Revised Minutes	(Pages 6 - 10)
5a)	Additional Item - Partnership Commissioning for Communities Discussion Document To consider proposals to establish a formal planning and delivery mechanism in order to explore opportunities for joint commissioning, shared priorities, collaborative budgets and shared staffing.	(Pages 11 - 16)

Yours sincerely

Lisa Antrobus
Clerk

Agenda Item 2



Revised Minutes of the Shadow Health and Wellbeing Board

22 November 2012

-: Present :-

Members of the Partnership:

Councillor Lewis (Chairman)	Torbay Council
Councillor Christine Scouler	Torbay Council
Councillor Mike Morey	Torbay Council
Councillor Bobbie Davies	Torbay Council
Debbie Stark	Director of Public Health
Richard Williams	Director of Children's Services
Simon Tapley (In place of Sam Barrell)	South Devon and Torbay Shadow Clinical Commissioning Group
Dr Adam Morris (In place of Sam Barrell)	South Devon and Torbay Shadow Clinical Commissioning Group
Kevin Dixon	Torbay Local Involvement Network

54. Apologies and Changes in Membership

Apologies for absence were received from Board Members: Sam Barrell (South Devon and Torbay Shadow Clinical Commissioning Group – who was represented by Simon Tapley, Chief Commissioning Officer and Dr Adam Morris, Commissioning Clinical Lead); Caroline Taylor (Torbay Council); Anne Mattock (Local Involvement Network) – who was represented by Kevin Dixon (Acting Chair of LINK) and Observers: Councillor Neil Bent, Councillor Jane Barnby; Councillor Ian Doggett; Siobhan Grady (Public Health); Kate Spencer (Torbay Council); Pat Harris (Torbay Local Involvement Network); Molly Holmes (Sanctuary Housing) and Simon Langridge (Torbay Healthwatch).

55. Minutes

The Minutes of the meeting of the Shadow Health and Wellbeing Board held on 20 September 2012 were confirmed as a correct record (after the amendment of Baywide GP Commissioning Consortium to South Devon and Torbay Shadow Clinical Commissioning Group) and signed by the Chairman.

56. Matters Arising from the Minutes

Arising from Minute 45, Debbie Stark has written to Devon Local Pharmaceutical Network to invite them to present to the Board.

Arising from Minute 50, Kate Spencer has completed.

Arising from Minute 52, Richard Williams had received the paper on Young Carers and would take the necessary action on behalf of the Council.

57. Update - South Devon and Torbay Shadow Clinical Commissioning Group

Dr Adam Morris, Commissioning Clinical Lead and Simon Tapley, Chief Commissioning officer, verbally advised the Board on the progress of the South Devon and Torbay Shadow Clinical Commissioning Group (CCG) towards its authorisation.

The CCG had successfully relocated to new premises at Pamona House in Edginswell, Torquay and a Clinical Commissioning Committee had been set up.

Recruitment for senior positions had been undertaken and filled.

58. Update Report - Public Health

Debbie Stark, Director of Public Health, advised members that there was an error in the submitted report (Agenda item 5), that 2.3 should read 2012 not 2013.

There were some health protection concerns with issues raised over IT access to NHS data which needed to be addressed.

Debbie Stark and Councillor Chris Lewis had attended a Health and Wellbeing Event in Taunton and will feed back to the Board.

59. Update Report - Children's Services

Richard Williams, Director of Children's Services, gave members a verbal update on Children Services issues.

The Children's Partnership Improvement Programme was continuing with an Improvement Board being held on 14 December 2012 and on 15 December 2012 there was a Review Meeting with the Department for Education.

He advised that Children's Services were still waiting for an Ofsted Inspection which was due any time and that an Ofsted Inspection of Adoption Services was taking place between 27 and 30 November 2012 where it was hoped there would be recognition of the capacity to improve within this service area.

There had been a very positive first meeting of the Child Poverty Commission held in the previous week and a copy of the presentation will be circulated to members. The next meeting would define the membership and work programme. Once this has been determined it would be reported to the Board.

He reported that no schools were now in Special Measures and results had improved across the Bay.

Action:

- i) Child Poverty presentation to be circulated to members; and
- ii) Update on the Child Poverty work programme and membership.

60. Update Report - Joined Up Health and Care

Debbie Stark, Director of Public Health, advised members that discussions on joint commissioning were still ongoing with the possibility of there being a Sub-Committee of the Health and Wellbeing Board being established.

It was reported that the themes within the emerging Joint Health and Wellbeing Strategies for Torbay and Devon were very similar.

A new Deputy Director of Adult Social Services (DASS), Julie Foster had recently been appointed.

Simon Langridge, Torbay Healthwatch, advised members that he had written to Caroline Taylor, Director of Adult Services, with concerns about, what he perceived to be, a lack of a clear commissioning structure at the current time and the need for robust scrutiny of those arrangements. He was advised by the Board that this should be considered through the Adults Policy Development Group (PDG) and it was suggested that he should attend the January PDG.

61. Joint Health and Wellbeing Strategy

Kate Spencer, Overview and Scrutiny Lead, presented a report on the draft Joint Health and Wellbeing Strategy and advised that a consultation had been undertaken throughout October 2012 with sixty responses received.

A paper setting the actions associated with Priority 4 and Priority 12 of the draft Strategy was circulated. The Board was asked to consider a number of issues which had been highlighted through the consultation process and the following points were made:

- Domestic violence: the Board recognised that there was a need to strengthen its links with the Stronger Communities Board
- Veterans: this was the responsibility of the NHS Commissioning Board
- Environmental Factors/Healthy Food: it was felt that these issues would be picked up through the Local Plan process
- Schools involvement in physical activity: this issue could be the subject of a future Health and Wellbeing Forum. Consideration should also be given to how to fully involve schools in the health and wellbeing agenda.

Agreed:

- (i) That, subject to the final action in relation to Priority 12 being amended to read:

“Reduce the risk of distress and harm to vulnerable members of the community subject to anti social behaviour and crime.”

the draft Joint Health and Wellbeing Strategy be accepted and that an Equalities Impact Assessment be undertaken together with a review of how the Strategy integrates with that prepared by the Devon Health and Wellbeing Board.

- (ii) That, subject to the content of the forthcoming Government regulations and/or guidance and the results of the Equalities Impact Assessment, the Strategy and Equalities Impact Assessment be forwarded to the Council and the South Devon and Torbay Clinical Commissioning Group for approval.
- (iii) That arrangements for delivering the actions and monitoring the outcomes of the Strategy be developed over the next six months.

Action:

- i) Councillor Chris Lewis to look into how the Health and Wellbeing Board fits in with schools and will have this as a topic for a future Forum Event.

62. Development of Health and Wellbeing Board

The Board heard a report on the development of the Health and Wellbeing Board and how it would operate after it formally took effect from 1 April 2013.

Agreed:

- (i) That a Torbay Health and Wellbeing Board Development Plan be prepared to include:
 - Learning points from the Development Session to be held immediately after this meeting
 - Arrangements for delivering the actions and monitoring the outcomes of the Joint Health and Wellbeing Strategy
 - Engagement arrangements which complement the arrangements being made by the Clinical Commissioning Group, emerging Local Healthwatch and the Health Scrutiny Board
 - Arrangements for interactions between the Torbay Health and Wellbeing Board and other statutory bodies (both within Torbay and beyond)
- (ii) That the Development Plan be prepared alongside the work undertaken by the Local Government Association on measuring progress of the Board against the LGA Development Tool.
- (iii) That the Development Plan and the feedback from the LGA Development Tool be considered at a Development Day for the members of the Torbay Shadow Health and Wellbeing Board to be held in February 2013 in order to ensure that robust arrangements are in place for the Board to assume its statutory status on 1 April 2013.

63. Any Other Business

The Clinical Commissioning Group are keeping to timescales with the Clinical Commissioning Plan going before their Board in early January 2013 and being put to Council in February 2013. It was requested that the Shadow Health and Wellbeing Board meet in January 2013 to give its views on the Clinical Commissioning Plan.

Debbie Stark, Director of Public Health, advised members that there was an opportunity for them to receive a briefing from the National Institute of Clinical Excellence. Members agreed for Debbie to extend an invitation for them to receive the briefing.

Siobhan Grady, Torbay NHS Care Trust, advised members that there was a funding opportunity for children worth £5 million. Richard Williams suggested that he bring the Expression of Interest for this funding to the meeting of the Board in January.

64. Date of Next Meeting

The next meeting of the Shadow Health and Wellbeing Board will be held on 21 January 2013 at 9.30am in the Town Hall, Torquay.

Chairman



Partnership Commissioning for Communities Discussion Document

Shadow Health and Wellbeing Board – 21 January 2013

1.0 Introduction

- 1.1 As part of the wider strategic commissioning framework of the Council and Clinical Commissioning Group it was agreed to explore opportunities for joint commissioning, shared priorities, collaborative budgets, and shared staffing.
- 1.2 Within this context the proposals have been made to establish formal planning and delivery mechanisms in order to take this work forward with supporting vision and work programme.
- 1.3 This document provides a basis for discussion with Board members asked to provide their views on the proposed way forward. This will enable views to be considered alongside the further development of the Terms of Reference and methods of working of the Health and Wellbeing Board itself. It is intended that the final proposals will be ratified at the meeting of the Board in March 2013.

2. Background

- 2.1 An initial meeting enabled greater understanding of roles and priorities as well as the complexities of cross organisational working and geographical boundaries. This being the case it was agreed to ensure Devon County Council representatives are included in planning of the work programme in consideration of the CCG footprint.
- 2.2 Benefits of shared working might include reduced duplication and aligned investment and service development to make best use of public resources across health and social care, with increasingly integrated care pathways; rooting joint commissioning strategy in the needs of the community and a joint approach to engagement of service users and residents.

3.0 Joint & Lead Commissioning

- 3.1 Joint commissioning between a CCG and a local authority will require more than informal cooperation and will need specific governance arrangements and supporting agreements. It need not necessarily involve the formal pooling of funds and the sharing of risks but this is generally seen as a valid aim and one that should be pursued.
- 3.2 Current discussion between the CCG and Torbay Local Authority has taken place to identify lead areas where one organisation might 'lead' in strategic planning and commissioning without formal 'pooled' budgets in place. The new post of CCG Head of joint commissioning to work collaboratively with the council in developing a commissioning plan including (Public health) children commissioning. Council (Public Health) sexual health commissioner take a lead

on behalf of CCG termination services commissioning. Whilst the postholder would develop the joint strategy, implementation plan including service specifications and liaise with providers, the CCG or Council would retain budget decision making, own procurement services and contracting services.

- 3.3 Further areas for consideration of lead responsibilities include children's emotional health, children with additional needs and carers services.
- 3.4 In addition there are a number of areas where there is already joint commissioning of services within Torbay such as alcohol and obesity and the Supporting People programme, as well as the arrangements between Torbay Council and Torbay & Southern Devon Health and Care NHS Trust for adult social care commissioning, mental health and learning disability. These arrangements are under review and will be included in the work programme of the proposed Joint commissioning management group.
- 3.5 Opportunities for joint and lead responsibilities between NEW Devon CCG and South Devon & Torbay CCG and council partners are also to be explored.
- 3.6 Staffing structures need to be confirmed with recruitment underway in the CCG organisation as well as changes within NEW Devon CCG and Council and Torbay and Southern Devon Health Care Trust.

4. Governance

- 4.1 It is proposed that a Joint Commissioning Management Group be established with relevant commissioning managers from the organisations with role to agree a shared work programme (incl Devon where possible) from January 2013. The group would function as a 'virtual commissioning team' with management and employment remaining with their parent organisation. Meeting monthly to report on progress, risks and budget updates as well as work up investment opportunities where a joint approach is needed.
- 4.2 A key task will be to align business planning cycles and commissioning intentions, including their relationship to NHS QIPP (Quality, Innovation, Productivity and Prevention) and service improvement and savings plans across children and adult services. The group would be responsible for developing schemes and proposals for the S256 allocation as well as developing joint commissioning strategies such as those for agreed key client groups within the work programme. (Mental Health Strategy; Sexual Health Strategy; Children's Emotional and Mental Health Strategy; as well as receiving reports on Continuing Healthcare, Intermediate Care and Reablement; Carers; Community Equipment; nursing and residential care).
- 4.3 The management group will need to have an understanding of the local market for health, social care and support, quality assurance of current commissioned services. As well as take a consistent approach to quality assurance of commissioned services incorporating learning from safeguarding reviews (i.e. Winterbourne View) and engagement with providers, service users and carers, maximising opportunities for cross area work and commissioning.

4.4 In terms of reporting and decision making there are 2 options for consideration:

4.4.1 **OPTION ONE**

Joint Commissioning Management Group be established in the first instance and monitor it's operation with a reporting mechanism straight to the Health and Wellbeing Board and parent organisational Boards. It is the responsibility of the Health and Wellbeing Board to promote joint commissioning and can act as lead commissioner for some services.

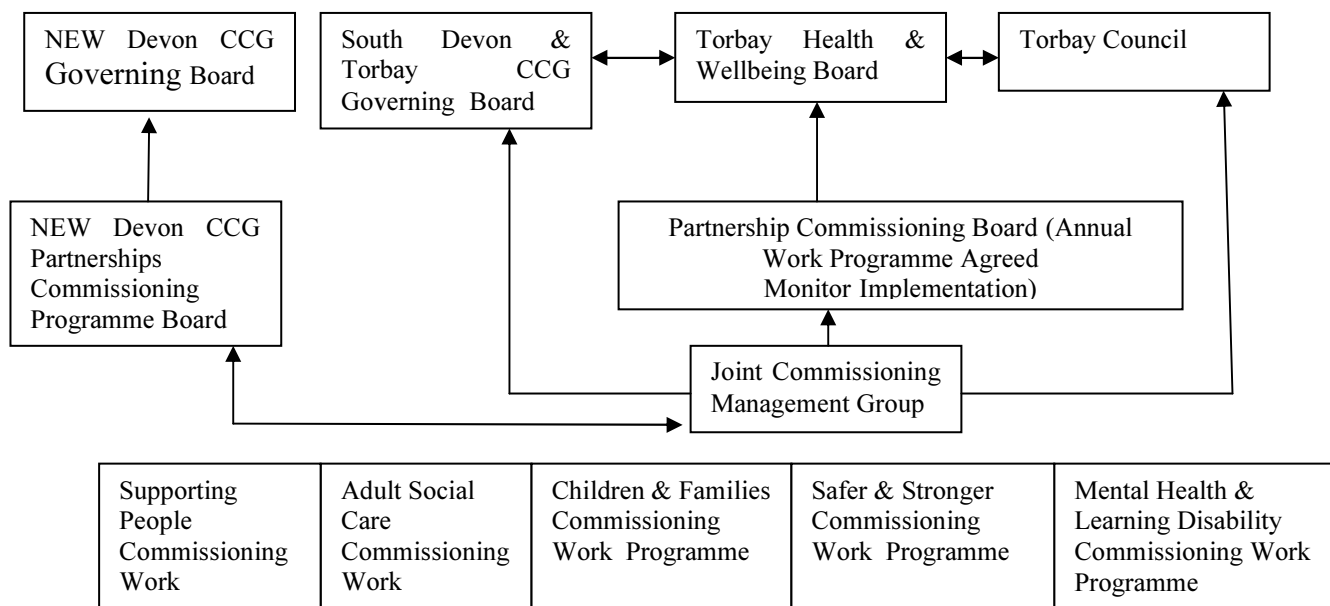
4.4.2 **OPTION TWO**

Joint Commissioning Management Group to report formally to a Partnership Commissioning Board with decision making authority which is established as a sub committee of the Health and Wellbeing Board.

4.5 Option Two is preferred and it is proposed to use the existing structure of 'The Torbay Commissioning for Independence Board' to form the wider Partnership Commissioning Board. This board has a well established joint commissioning remit and will align decision making processes for key groups.

It will allow the Heath and Wellbeing Board to focus on developing vision and strategy for the whole population by providing assurance of quality, safety and efficiency in commissioned services and assuming delegated authority for commissioning and decommissioning decisions.

4.6 Draft Terms of reference for the Joint Commissioning Management Group and Partnership Commissioning Board are attached to this report.



Supporting People Commissioning Work	Adult Social Care Commissioning Work	Children & Families Commissioning Work Programme	Safer & Stronger Commissioning Work Programme	Mental Health & Learning Disability Commissioning Work Programme
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Contact Officer: Siobhan Grady
 Representing: Torbay Council and South Devon and Torbay Clinical Commissioning Group
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JOINT COMMISSIONING MANAGEMENT GROUP DRAFT TERMS OF REFERENCE

Purpose

The purpose of the Joint Commissioning Management Groups is :

- To oversee all joint commissioning activity as agreed within the annual work programme across the CCG and Torbay Local Authority for services. Including planning and implementation.
- To develop and implement joint commissioning arrangements across the NHS in South Devon and Torbay and Council in Torbay. In exercising this function the management group will need to take account of the changing legal landscape and national policy.
- The Joint Commissioning Management Group will report to the Partnership Commissioning Board and parent Boards.

Functions:

The Joint Commissioning Management Group will be responsible for:

Agreeing proposals to the CCG and Council for joint commissioning strategies, ensuring that they are consistent with the Health and Wellbeing Strategy

Developing proposals for and monitoring an Annual Commissioning Plan (including the CCG Annual operating plan, QIPP and other cost and service improvements), including the budget, and proposing financial contributions from both the NHS and Council. (including section 256 monies).

Receiving and considering reports on service development, budget monitoring, audit and inspection reports in relation to those services which are within the annual work programme.

Providing updates on implementation of annual work programme by exception and highlight, budget monitoring and an annual performance report to the Partnership Commissioning Board and parent boards.

Develop commissioning and decommissioning plans where these are in line with, or will impact on, joint work plan.

Develop proposals for procurement exercises when required, which shall be undertaken in accordance with the NHS and Council's Standing Orders on Procurement and Contracts, and variations to contracts entered into by either Party for the delivery of Services.

Ensuring the appropriate contract terms are used in relation to specific services, agreeing key performance outcomes and measures.

Frequency of Meetings

The Joint Commissioning Management Group will meet monthly.

The dates will be aligned with the Partnership Commissioning Board, Health and Wellbeing Board and the CCG Commissioning Board so that relevant reports from the management group are timely.

The CCG Head of Joint Commissioning will take role of chair for the first 12 months and will be rotated on a 12 monthly basis.

The agenda and all reports will be published a minimum of five working days before the meeting. The unconfirmed minutes of the meeting to be published within five working days of the meeting.

The group does not have decision making authority but will reach mutual agreement for ratification by Partnership Commissioning Board and parent organisations.

PARTNERSHIP COMMISSIONING BOARD DRAFT TERMS OF REFERENCE

Purpose:

The purpose of the Partnership Commissioning Board is :

- To support the Health and Wellbeing Board in delivering service change and improved outcomes through partnership working and collaborative joint commissioning.
- To align decision making processed for commissioning and decommissioning plans where these support the agreed joint work plan.
- The partnership Commissioning Board will report directly to the Health and Wellbeing Board on partnership commissioning.

Functions:

Define, within the parameters established by the Health and Wellbeing Board the priorities for collaborative commissioning and development between the partners.

Approve Annual Commissioning Plan including supporting plans are in place to deliver commitments across areas of joint commissioning responsibility for pooled or non-pooled budgetary provision.

Provide an annual report on outcomes against the agreed Commissioning Plan for information to the Partners at Health and Well Being Board.

Promote through joint activity the efficiency and the effectiveness of the use of public finance.

Develop a market position statement and engage with community voluntary sector, other service providers, service users and carers to promote a range of provision.

Develop service procurement strategies, including market testing where this is appropriate to the interests of the partners.

Provide clear and authoritative direction in organisational development to promote quality and efficiency improvement programmes across Torbay.

Provide assurance to the Health and Wellbeing Board of value for money and return on public investment achieved through collaborative activity.

Provide assurance to the Health and Wellbeing Board that all risks to the communities serviced by the partners arising from collaborative commissioning and development activity, are identified, mitigated and kept under review.

To review annually the arrangements for joint commissioning and make proposals for variation and / or renewal to the Partners for approval.

Confirm the allocation of the budget approved by the partner organisations including any additional non-recurring contributions.

To review and propose annually a risk assessment and risk sharing protocol when required and agreeing actions arising from the review.

Frequency:

The Partnership commissioning Board will meet quarterly and at a time to be agreed and within 10 working days of receipt of each quarterly report of the Joint Commissioning Manager.

Decisions of the Partnership Commissioning Board shall be made unanimously by those present. Where unanimous agreement is not reached the decision will be referred back to the

Authorised officers and the parent organisation.

The agenda and all reports will be published a minimum of five working days before the meeting.

The unconfirmed minutes of the meeting to be published within five working days of the meeting.