

# Minutes of the Health and Wellbeing Board

## 3 December 2013

-: Present :-

Councillor Bobbie Davies, Siobhan Grady, Doug Haines, Pat Harris, Tony Hogg, Councillor Chris Lewis (Chairman), Graham Lockerbie, Councillor Mike Morey, Councillor Christine Scouler, Caroline Taylor and Richard Williams

#### 43. Apologies

Apologies for absence were received from Councillor Pritchard, Paula Vasco-Knight, Sam Barrell who was represented by Siobhan Grady and Caroline Dimond who was represented by Doug Haines.

#### 44. Minutes

The minutes of the meeting of the Health and Wellbeing Board held on 19 September 2013 were confirmed as a correct record and signed by the Chairman.

#### 45. Appointment of Vice-Chairman/woman

Caroline Dimond was appointed Vice-Chairman for the remainder of the 2013/2014 Municipal Year.

## 46. Update Report - Adult Social Services

The Board noted the update on adult services and were advised that due to a decrease in funding to social care and preventative services, discussions were being held in order to raise income through other systems.

The Board further noted that the acquisition process of Torbay and Southern Devon Health and Care NHS Trust (TSDHCT) continued. The expected timetable of completion and establishment of the Integrated Care Organisation (ICO) had been moved back from April 2014 to July 2014.

## 47. Update Report - Clinical Commissioning Group

Members noted the update from South Devon and Torbay Clinical Commissioning Group. Members were advised that a series of engagement events regarding the future of their community health and social care services have been held across the five commissioning localities. Members were also advised that the Clinical Commissioning Group's Integrated Plan 2013-2016 was being updated in light of planning guidance from NHS England. Members were requested to forward any comments to Jo Turl (jo.turl@nhs.net) by the middle of January 2014 after which the Clinical Commissioning Group will approve the final version of the Plan.

#### 48. Pioneer Status

The Board received an update on the bid to become a pioneer site. Members were advised that as a pioneer site, progress could be made to implement plans to offer people joined up care across the whole spectrum of services, including mental health and GP services. There would also be a move towards seven day services with patients being in the place that is best for them. Mental health services will be as good and as easy to access as other health services with care being coordinated so that people only have to tell their story once.

Members were advised that there remained some minor issues to overcome such as free flow of data and finance, there was national support for a joined up system and permission to find local solutions to the issues.

By consensus the Board resolved that:

- i) the Health and Wellbeing Board notes the success of the bid for Pioneer status;
- ii) that the Health and Wellbeing Board provide oversight and challenge to the integrated programme of Pioneer work; and
- iii) that the Joint Health and Wellbeing Strategy be reviewed to ensure that it aligns to the delivery of the Pioneer programme.

## 49. Integration Plan (Integrated Transformation Fund)

The Board considered a report that outlined a plan which was being developed as part of the requirements of the Integration Transformation Fund (ITF). Following the success of the health and social care community being approved as a Pioneer site, partners have developed the Integration Plan which would deliver the priorities set out to achieve whole system change through the ICO and progress the projects as set out in the original Pioneer bid.

Members were advised that ITF does not come into full effect until 2015/16, however there was an expectation that clinical commissioning groups and local authorities build momentum in 2014/15, using the additional £200 million due to be transferred to local government from the NHS to support transformation. Whilst the ITF is a significant amount of money, the health and social care community in Torbay is already committed to providing excellent joined up services and therefore, the opportunities of ITF could apply equally to the whole ICO. This would result in a overall pooled budget of £3.8 billion.

By consensus the Board resolved that:

- i) the draft Integration Plan be reviewed and that the Board discuss and comment on its further development;
- ii) the final Integration Plan be presented to the Health and Wellbeing Board in line with national expectations; and
- iii) the principle of a 'single pooled' arrangement for revenue and capital aspects of the Integrated Transformation Fund, in line with the local work to date on an Integrated Care Organisation and our pioneer plans for improving the outcomes of the health and well being of our community, be endorsed.

## 50. Health Protection Committee

Members considered a report that sought to establish a Health Protection Committee covering Devon, Plymouth and Torbay.

By consensus the Board resolved:

That, subject to the agreement of Devon and Plymouth's Health and Wellbeing Boards, the establishment of the Health Protection Committee working to the proposed terms of reference in Appendix 1 to the submitted report be approved.

## 51. Update Report - Public Health

The Board noted the update on Public Health in particular the plans for the 2014/15 Joint Strategic Needs Assessment (JSNA). The JSNA would be produced under the auspices of i-Bay in order to reflect a greater wealth of intelligence and knowledge data.

## 52. Update Report - Healthwatch

The Board noted the update on Healthwatch in particular the issues Healthwatch were experiencing with various methods of engagement and their levels of influence as a result.

## 53. Update Report - Children's Services

Members noted the update on Children Services and were advised that subject to the Department for Education agreeing, it was hoped Children Services would no longer be in intervention.

## 54. Update Report - Police & Crime Commissioner

The Police & Crime Commissioner (PCC) welcomed the invitation to join the Health and Wellbeing Board (HWB) and recognised the cross over that his role had with the work of the HWB. The PCC expressed the view that the HWB had a well established health and social care focus however felt that the wellbeing element of the HWB needed further development. The PCC advised the Board that he had been involved in a peer review of Cornwall's Health and Wellbeing Board, the review identified a number of strengths and weaknesses and may be of use when reviewing the impact of Torbay's Health and Wellbeing Board.

## 55. Report from the Child Poverty Commission

The Board received a report of Torbay's Child Poverty Commission. Michelle Kennedy, Chairman of the Child Poverty Commission, informed members that the Child Poverty Commission was set up to look at how Torbay is performing on the targets set out in its Child's Poverty Strategy. The Child Poverty Commission have taken evidence, challenged assumptions and put in place mechanisms to ensure that the recommendations in their report do not just gather dust, but that they were implemented, monitored and that those responsible can be held to account.

Michelle advised that the Commission heard a range of evidence over a period of 10 months during which a number of common themes emerged, these themes included:

- Greater focus and work with families in poverty to build pathways to work;
- Stronger shared leadership and partnership working from the Council and partners on this agenda, including championing and developing the talent and skills of parents and young people in poverty;
- Building stronger links between parents, education and business
- Supporting a housing strategy that will provide decent standards, safe longterm housing tenure and stability for those that need it most;
- Building on the good practice of models such as Hele's Angels and other neighbourhoods based models;
- Ensuring that services build child poverty outcomes into their budgeting, commissioning and delivery frameworks.

Michelle advised that the Child Poverty Commission would like the recommendations to be adopted and for the Health and Wellbeing Board take ownership of an action plan. Members were advised that the action plan was currently being compiled and would be formally presented to Council in February 2014.

By consensus the Board resolved that:

- the Health and Wellbeing Board be responsible for overseeing the implementation of the action plan, once approved by Council in February 2014; and
- ii) the Child Poverty Commission be recalled on an annual basis to review progress and hold the Health and Wellbeing Board to account.