

Health & Wellbeing Board Minutes

Monday 4 November 2013

PRESENT

Committee members:

Councillor Marcus Ginn, Cabinet Member for Community Care (Chairman)
Dr Tim Spicer, Chair of H&F CCG (Vice-chairman)
Councillor Helen Binmore, Cabinet Member for Children's Services
Liz Bruce, Tri-borough Executive Director, Adult Social Care
Andrew Christie, Tri-borough Executive Director of Children's Services
Eva Hrobonova, Deputy Director of Public Health

In attendance:

Councillor Georgie Cooney, Cabinet Member for Education
Philippa Jones, H&F CCG
Keith Mallinson, H&F Healthwatch
Janet Shepherd, Director of Nursing and Patient Experience for North West London, NHS England
Peter Smith, Head of Policy and Strategy
David Evans, Service Development Projects Manager
Sue Perrin, Committee Co-ordinator

22. MINUTES AND ACTIONS

RESOLVED THAT:

- (1) The minutes of the Health & Wellbeing Board held on 9 September 2013 be approved and signed as a correct record of the proceedings.
- (2) The HWB would recommend to the Council that two additional members of the Hammersmith & Fulham Clinical Commissioning Group (CCG) should be appointed to the HWB and that all members of the HWB should be entitled to vote.

23. APOLOGIES FOR ABSENCE

Apologies were received from Trish Pashley.

24. DECLARATIONS OF INTEREST

There were no declarations of interest.

25. WORK PROGRAMME

RESOLVED THAT:

The work programme be noted.

26. HAMMERSMITH & FULHAM CCG COMMISSIONING INTENTIONS 2014/2015

Dr Tim Spicer tabled a summary of the key areas of intent from the H&F CCG Commissioning Intentions for 2014/2015. There would be further changes to the document during the following week, but substantial alterations were not anticipated.

Dr Spicer referred to the graphic representation of the process, which indicated that the CCG was currently refining/developing commissioning intentions, which were summarised by joint CCG and local authority (LA) and CCG specific intentions. The latter had subsequently been split to indicate health only intentions.

In respect of Children's services, it was agreed that the work with LA social care and education partners to develop robust plans for delivering the new Children and Families Legislation (statute September 2014), which was included in the detail of the report, should also be brought forward as a headline.

Keith Mallinson referred to community dressing services and the high number of patients presenting to Urgent Care Centres (UCC). Dr Spicer responded that there were different models of tissue viability services across the country. H&F CCG was currently redrafting the details of the provider statement. Whilst there would always be a requirement for some home visits, patient experience and outcomes seemed to be better by centralising services, maybe at a local hospital.

Liz Bruce referred to joint commissioning of the Tri-Borough Community Independence Service specification and learning disabilities essential activity, and the cross cutting issues in respect of, for example transition from children's to adult services, including specialised education needs. Dr Spicer responded that transition was clearly a risk area from a clinical aspect.

Councillor Georgie Cooney queried the continued use of the hydro-therapy pool at Charing Cross. Dr Spicer responded that this would be dependent on which therapies the providers considered to be best.

Eva Hrobonova queried whether the commissioning intentions could alter spending patterns in terms of care and age groups. Dr Spicer responded that whilst the commissioning process made it difficult to give a definite answer at

this stage, it was intended to shift resources away from unplanned to planned care.

Andrew Christie commented that the forward plan for the Local Safeguarding Children's Board might overlap with that of the HWB, and there were a number of issues arising from serious case reviews, which might be relevant to the HWB, such as the CCG and LA working together to share information. A report could be brought to a future meeting as the basis for a discussion on how the two boards could ensure that vulnerable people were being supported. Ms Bruce stated that these issues linked with the HWB's responsibility for the implementation of the learning from the Winterbourne View Inquiry.

Mr Mallinson commented that education should also be included. There were specific issues in respect of children in bed and breakfast accommodation and encouraging parents to avail themselves of services on offer.

Action:

A report/discussion on support to vulnerable children and adults to be added to the work programme.

Action: Sue Perrin

Dr Spicer responded to a comment in respect of looked after children remaining with one GP that he was personally supportive, but ensuring consistency across the borough was outside his remit.

In response to a query from Councillor Helen Binmore, Dr Spicer agreed to provide a written response in respect of the definitions of 'Targeted CAMHS and CAMHS on call'.

Action: Tim Spicer/Philippa Jones

Dr Spicer confirmed that the work in respect of GP access included teenage pregnancy.

Members considered the move from a process based approach to an outcomes based approach and the greater involvement of Public Health. Dr Spicer noted a number of services were provided for individuals with chronic illnesses, who would never return to a healthy and independent state. The outcome would be in respect of improved health and ability to manage for themselves in their own home.

Philippa Jones clarified that the document set out the starting point for Consultant delivered care services seven days a week, with the aim of achieving 24/7 delivered care by 2017/18.

Mr Mallinson referred to the sustainability of services and queried the safeguards to ensure that quality was maintained. Dr Spicer responded that

he did not believe that this had been fully achieved, and that there had been compromises between integration, competition and quality.

Ms Jones stated that the CCG was keen to improve the process for 2015/2016. Councillor Ginn noted the Council's responsibility to share appropriate documents, including the Business Plan with the CCG in future planning cycles.

RESOLVED THAT:

- (i) The HWB endorsed the H&F CCG Commissioning Intentions for 2014/2015.
- (ii) The HWB noted the CCG's efforts to engage with a wide group of stakeholders and the HWB.
- (iii) The HWB, at its March meeting, would agree the process for developing Commissioning Intentions for 2015/2016.

27. FURTHERING THE BOROUGH OF OPPORTUNITY: A SHARED VISION FOR HAMMERSMITH & FULHAM 2014-2022

Peter Smith presented the strategy document, which had been drafted by Council officers and key partners, to present an overarching vision for the future of the borough. There was currently a public consultation, with a deadline of 16 December 2013.

The forward by the Leader of the Council set out the seven key priorities for delivering the Council's vision for the borough.

The section 'Improving Health and Wellbeing' had been drawn from the draft HWB strategy.

It was proposed that specific priorities be added in respect of children and young people and adult health and social care. The priorities needed to be developed into desired outcomes.

It was agreed that reference should be made to the substantial changes which would be brought about by the new Children and Families Legislation.

Action: Peter Smith

In response to a query in respect of the difference in life expectancy, Dr Spicer outlined one approach whereby an individual's risk was assessed and resources supplied to mitigate. Frequently, there were other factors such as housing and access to work. Ms Hrobonova added that it was not possible to say how great a difference could be made, but by better understanding the elements, it was possible to change behaviour and to put in place interventions. Access and better knowledge of data was essential, for example in respect of the biggest causes of preventable deaths.

RESOLVED THAT:

The strategy document be noted.

28. JOINT HEALTH & WELLBEING STRATEGY: UPDATE

David Evans presented the strategy, which was being consulted upon in parallel with the Community Strategy. Members considered priority 6, 'to develop better access to suitable housing for vulnerable older people'.

Members considered the role of the HWB, including the governance arrangements and the value added by the HWB. It was agreed that both the integrated health and social care services and the White City Collaborative Care Centre (Park View) would have happened without the HWB, but other priorities might not have happened without the HWB.

Members commented that the objectives, and specifically 'every child has the best start in life' were too broad.

Ms Bruce commented that the HWB had an important role in bringing together a range of partners to work collaboratively.

Ms Hrobonova confirmed that the priorities were broadly aligned with the CCG Commissioning Intentions.

RESOLVED THAT:

- (i) The Cabinet Member for Housing and Executive Director for Housing be invited to the next meeting to discuss better access for vulnerable people to sheltered housing.
- (ii) The HWB priorities should be amended to be more focused, with specific outcomes.
- (iii) In respect of Governance Arrangements, the value added by the HWB should be linked into the consultative document.
- (iv) An update on the priorities, with an additional column to indicate the value added by the HWB, should be a standard agenda item.

29. CHILD ORAL HEALTH IMPROVEMENT INITIATIVES

Dr Claire Robertson presented the update on child oral health improvement initiatives, including an overview of the 'Keep Smiling Programme', a school-based outreach programme.

Another child health day was being planned for the following year, this time for younger children.

Dr Robertson requested that the HWB recommended how the programme could engage with GPs. Dr Spicer responded that the programme could be promoted through the GP networks. It could also be a contractual issue in respect of provider expectations. It was agreed that Dr Robertson would meet with the CCG, and provide a brief update to the January HWB.

Action: Claire Robertson/Tim Spicer

Councillor Binmore requested that the original statistics be revisited, with a view to demonstrating the impact of the programme.

Mr Mallinson queried emergency provision for children who were not registered with a GP. Dr Robertson responded that the nurse led triage would ensure that those in immediate need would be allocated an urgent care slot with a clinician on the following day.

RESOLVED THAT:

The ongoing work be noted.

30. PUBLIC HEALTH BUSINESS PLAN UPDATE

Ms Hrobonova presented the report and highlighted that: the first meeting of the Tri-borough JSNA Steering group had taken place; the post of JSNA Manager had been advertised; there had been no new applications for JSNA 'Deep Dives' for the three boroughs; and the JSNA highlight report had been drafted.

Councillor Binmore proposed a female genital mutilation deep dive.

In respect of the highlights report, Councillor Binmore queried:

- the source and back up data for the report that the number of children reaching school readiness had dropped;
- the data in respect of education attainment.

Action: Eva Hrobonova

RESOLVED THAT:

The report be noted.

31. INTEGRATION TRANSFORMATION FUND:ORAL UPDATE

Ms Bruce stated that information in respect of Integration Transformation Fund allocations was expected in the Autumn statements for both health and local authorities.

North West London had been successful in becoming a pioneer site to showcase innovative ways of creating change in the health service across the eight London boroughs.

The initiatives would include: prevention and early intervention to reduce the number of unplanned emergency admissions to hospitals, with better outcomes for patients and better experiences of care. Financial savings were also expected.

The plan would be submitted to the January meeting for approval and submission on 15 February.

RESOLVED THAT:

- (i) The oral update be noted.
- (ii) A report on the North West London site be added to the work programme.

32. DATES OF NEXT MEETINGS

Meeting started: 4pm

Meeting ended: 6pm

Chairman

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