

Health & Wellbeing Board Minutes



Monday 21 March 2016

PRESENT

Committee members: Councillors Vivienne Lukey (Chair) and Sue Macmillan
Dr Tim Spicer, H&F CCG (Vice-chair)
Vanessa Andreae, H&F CCG
Janet Cree, H&F CCG
Stuart Lines, Deputy Director of Public Health
Keith Mallinson, H&F Healthwatch Representative

Nominated Deputies Councillors:
Councillors Sharon Holder and Rory Vaughan

Officers:
Chris Neil, Adult Social Care, Whole Systems Lead
Steve Miley, Director for Family Services

Other attendees:
Professor Chris Ham, Kings Fund and a representative from NHS NW London

41. MINUTES AND ACTIONS

RESOLVED

That the minutes of the meeting of the Health and Wellbeing Board, held on 9 February 2016, be agreed and signed as an accurate record by the Chair, Councillor Vivienne Lukey.

42. APOLOGIES FOR ABSENCE

Apologies for absence were received from Liz Bruce, Executive Director of Adult Social Care, Mike Robinson, Director of Public Health, Ian Lawry from Sobus, Andrew Christie, Director of Children's Services and Harley Collins, Health and Wellbeing Manager.

43. DECLARATIONS OF INTEREST

There were none.

44. PLACE-BASED SYSTEMS OF CARE: A WAY FORWARD FOR THE NHS IN ENGLAND

Professor Chris Ham gave a presentation to the board on 'Place-based systems of care'. The full presentation can be found on pages 61-75 of the agenda. Chris Ham talked about three versions of place based systems and how the NHS was taking the idea forward. He also explained health and social care integration under the aegis of the health and wellbeing boards (HWBs) and outlined the purpose and scope of the sustainability and transformation plans (STPs). He then identified the emerging issues which included the size and complexity of the task and the deadlines, as well as, leadership, management capacity and the role of the local authority.

He outlined the local government version of place based systems and gave the examples of Greater Manchester's devolution plan and the integrated care pioneering which had taken place in Leeds. He explained that the focus was on whole populations and public service and community budgets. He also talked about the bold vision for the 'northern powerhouse'.

Chris Ham then summarised health and social care integration and talked about the Isle of Wight, Torbay and West London and new care models under the NHS. With regard to the Isle of Wight he explained that working under the health and wellbeing board had already been established and provided overall leadership for the transformation programme. He went on to talk about relationships with STP's and the behaviours of leaders and concluded that system leadership was needed at all levels to realise the benefits; and, that HWB's had a role in providing that leadership.

Chris Ham moved onto the implications for Hammersmith and Fultham and across NW London in specialised health services. He talked further on local acute services across the Borough and about community, primary and social care as well as population health at all levels. He explained that there was a broader shift in the focus for individuals and populations and that improving population health and outcomes was the overall goal. He then talked through the challenges and how to ensure progress in Hammersmith and Fulham and posed four questions for the Board which were;

1. What part should the Board play in providing place based leadership?
2. Were the right people sitting around the table?
3. Did the board have the support it needed?
4. Was there an appetite for taking on the role that was emerging for the HWB in the Isle of Wight and was under discussion elsewhere?

Steve Miley asked how the Isle of Wight model worked and Chris Ham stated that they had a broad vision and an overarching board. That they had split provision and partnering enabled them to provide services effectively.

Keith Mallinson commented that public input was important and that he would like to see more members of the public involved in the future governance

arrangements. He also felt it would be useful to have the health unions support for future plans.

Stuart Lines asked if there were any examples of public health input into population health improvement systems and Chris Ham stated that in Manchester the public health had been used as a common research tool for interested parties and that they had retained their statutory responsibilities.

Councillor Lukey expressed concern that existing structures and the complexity of arrangements could be a barrier to effectiveness, as well as, the size and make up of NW London. In response Chris Ham confirmed that in areas where the place based systems of care were happening it was due to the leadership of the local authorities. He added that there were examples of smaller and larger areas where it was working.

Vanessa Andreae commented that it was important for the CCG and local authority to work together and that there was a need to overcome the current issue of Charing Cross hospital. Councillor Vaughan added that the majority of local authorities were opposed to the strategic plans and agreed it was primarily about leadership. He gave the example of the flu immunisation roll out and the fragmentation of the approach. He also reiterated the need to work together and added that personal relationships were more difficult to maintain without workforce sustainability. He also asked how success would be measured. Chris Ham confirmed that it was the role of the commissioners to define success and that his expectation was that there would need to be a huge amount of consensus.

Vanessa Andreae commented that in order the HWB to accept responsibility for overall decisions they would need to be able to influence outcomes. Dr Tim Spicer added that NW London had a more transient population with less predictable needs than some of the example areas. He also noted that the Imperial which had specialised equipment was an asset for the area. He further commented that community ownership was an important issue where residents were more powerful and had greater levels of responsibility; and, he made reference to Baltimore where such a scheme was in place with 51% of residents sitting on a similar decision-making board.

Keith Mallinson asked why there was no one from the Mental Health Trust on the board and Chris Neil explained that the next item on the agenda covered the membership of the board. He then asked members for comments on the best practice criteria for the board which was detailed on pages 81-82 of the report. Councillor Lukey stated that some blocks were in place but that the pace was moving too slowly. She also felt that children should be included more in the planning. Councillor Macmillan added that OFSTED had recently criticised the HWB for not covering children sufficiently.

Councillor Lukey proposed a half a day session for the board to discuss the issues more fully. This was agreed by Members.

ACTION CHRIS NEIL

Councillor Holder stated that it was also important to establish as much information around patient communication as possible going forward.

Chris Ham concluded by stating that the Audit Commission had found that not enough attention was given to decision making and membership in partnership working. He also stated that it was about going back to basics to avoid competitive behaviours between partners and to identify where constituent organisations were willing to give up power.

RESOLVED

That the report be noted.

45. STRATEGIC PLANNING: REVIEWING PROGRESS AND LOOKING FORWARD TO THE REFRESH OF THE JOINT HEALTH AND WELLBEING STRATEGY

Stuart Lines gave a presentation on the Health and Wellbeing Strategy supporting information for Hammersmith and Fulham. The full presentation can be found on pages 90 - 126 of the agenda.

In summary Stuart Lines talked through the characteristics and demographics of the local population. He also touched on life expectancy, age, child and adult health, gender, family breakdown, disability, sexual orientation and deprivation. He went on to present information on health inequality trends and ethnicity health inequalities, housing, patterns of health and vulnerable groups in the Hammersmith and Fulham area. There was also research on mental illness, HIV, problem drug users, changing patterns of need and projections of the prevalence of selected diseases in the area.

In response to a question from the Chair about breaking the information down by ward it was confirmed by Stuart Lines that this would be possible for some of the slides but not all of them. He also confirmed in response to a question from Steve Miley about rising alcohol abuse that identifying parents from hospital admissions was not in line with current practice. Dr Tim Spicer commented that with alcohol abuse there was no age limit when it stopped and that Hammersmith and Fulham were currently providing data in this area which was being utilised across London.

Vanessa Andreae commented that with regard to prevalence of selected diseases in Hammersmith and Fulham there was work to be done on cancer. Stuart Lines added that what was preventable was the key. Councillor Lukey commented that increased monitoring information was useful and Councillor Vaughan asked the CCG what were the key messages for smokers. Councillor Sue Macmillan commented that alcohol abuse was a good area of focus for a future report.

Councillor Lukey stated that community grants were a positive area that the board could influence and join up processes to use finances to improve health outcomes. Vanessa Andreae agreed that it would also be beneficial in terms of governance arrangements. Dr Tim Spencer stated that social isolation and long-term conditions were also areas that the board could work together on. Stuart Lines added that smoking cessation was the best way to improve health and the issue was how to target particular groups.

Councillor Lukey reminded Members of the upcoming community event with a focus on poverty, diet and healthy eating.

ACTION - Chris Neil

Chris Neil discussed arranging a half day development session with Members to discuss the care budgets 5 to 10-year deficit and long term financial planning.

RESOLVED

- i) That the position of the Health and Wellbeing Boards across the country and progress made to date, be noted.
- ii) That population health need in the borough, how needs and demography have changed and how they are expected to change in the future, be noted.
- iii) That recent policy announcements and how the board will need to adapt to offer system leadership in the future, be noted.
- iv) That early thinking about what the new Health and Wellbeing strategies could cover, be considered.
- v) That a high-level timeline for the development of the plans at this stage be followed up at a half day meeting to be scheduled in May 2016.

46. LIKE MINDED - UPDATE ON THE TRANSFORMING CARE PARTNERSHIP PLAN FOR PEOPLE WITH A LEARNING DISABILITY AND/OR AND CHALLENGING BEHAVIOUR

It was stated that a NW London plan was being developed to avoid people moving out of the area. She added that it was an all ages plan and that the first draft was in the report on pages 138 - 174. She also stated that they were in collaboration and working on its development with Mary Dalton.

Councillor Lukey asked about the transition task force and Steve Miley confirmed that this was still in the forming stage. There was further discussion amongst Members on what could be included in the final report.

Janet Cree commented that the timeframe ensuring the final plan was reviewed in more detail needed to be signed off in June 2016.

Councillor Lukey concluded that the draft report was impressive.

RESOLVED

- i) That the first draft North West London Transforming Care Partnership plan noting that further updates will be made to address the areas of underdevelopment, be endorsed.
- ii) That delegated authority to the relevant committee to approve the final local and NW London Transforming Care Partnership plan in order for this to be submitted to NHS England on 11 April 2016, be endorsed.

- iii) That the final plans will be reviewed by the HWBB in May. The plan will then be implemented from April 2016, and be reviewed in 2019/20, be endorsed.

47. BETTER CARE FUND UPDATE: QUARTER 3 PERFORMANCE REPORT

Chris Neil commented that there was a £200 million budget for the Better Care Fund locally. He also confirmed that there was additional information to go with the report which he would circulate outside of the meeting. He apologised the information was not included in the agenda.

ACTION - Chris Neil

RESOLVED

That the Health and Wellbeing Board commented on progress to date and on the Quarter 3 Better Care Fund submission, be noted.

48. END OF LIFE CARE JSNA

Stuart Lines stated that multi-agency JSNA informed strategy priorities and affected all services. He also added that there were five key recommendations and that the one which was of particular interest to the HWB was strategic leadership for end of life care.

Councillor Lukey proposed that it could be a role for the Board and requested it be added to the forward plan and a report be scheduled for a future meeting. This was seconded by Councillor Vaughan. Dr Tim Spicer talked about the NW London footprint and stated that it would bring together formal providers and the voluntary sector. He added that the JSNA was likely to be acted upon and would build good practice.

An additional item was circulated by Janet Cree which was the 2016/17 Operating Plan - Quality Premium Guidance.

There was a discussion amongst members regarding the forward plan and delegated authority for the June 2016 meeting. Chris Neil agreed to update the forward plan.

Action - Chris Neil

RESOLVED

- i) That the Health and Wellbeing Board approved the End of Life Care JSNA for publication, and how the JSNA will be used to inform local strategic approaches to end of life care, be approved and noted.
- ii) That the Health and Wellbeing Board considered the recommendations arising from End of Life Care JSNA, in particular Recommendation 3, and provided a steer on how this should be implemented locally, be noted.

- iii) That the recommendation that the Health and Wellbeing Board review progress against recommendation in 1 year from publication, be noted.

49. WORK PROGRAMME

Steve Miley requested that where there was an overlap of agenda items that reports on children services be prioritised.

Councillor Macmillan stated it would be good to have reports on education health and care plans soon.

Councillor Lukey agreed to juggle the future work programme where possible at the half day development session in May 2016.

RESOLVED

That the report be noted.

50. DATES OF NEXT MEETINGS

20 June 2016.

Meeting started: 6.30 pm
Meeting ended: 8.30 pm

Chair

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