



Buckinghamshire County Council

Select Committee

Health and Adult Social Care

Date: Tuesday 24 January 2017
Time: 10.00 am (pre-meet for Members at 9.30am)
Venue: Large Dining Room, Judges Lodgings, Aylesbury

AGENDA

9.30 am Pre-meeting Discussion

This session is for members of the Committee only. It is to allow the members time to discuss lines of questioning, areas for discussion and what needs to be achieved during the meeting.

10.00 am Formal Meeting Begins

Agenda Item	Time	Page No
1 APOLOGIES FOR ABSENCE / CHANGES IN MEMBERSHIP	10.00am	
2 DECLARATIONS OF INTEREST To disclose any Personal or Disclosable Pecuniary Interests		
3 MINUTES To confirm the minutes of the meeting held on Tuesday 18 October 2016 and the special meeting held on Tuesday 29 November 2016 as a correct record.		7 - 12
4 PUBLIC QUESTIONS This is an opportunity for members of the public to put a question or raise an issue of concern, related to health. Where possible, the relevant organisation to which the question/issue is directed will be present to give a verbal response. Members of the public will be invited to speak for up to four minutes on their issue. A maximum of 30 minutes is set aside for the Public Questions slot in total (including responses and any Committee discussion). This may be extended with the Chairman's discretion.	10.10am	



CHILTERN
District Council



South Bucks
District Council



WYCOMBE
DISTRICT COUNCIL

For full guidance on Public Questions, including how to register a request to speak during this slot, please follow this link:

<http://www.buckscc.gov.uk/about-your-council/scrutiny/getting-involved/>

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|----------|--|----------------|----------------|
| 5 | CHAIRMAN'S UPDATE | 10.30am | |
| 6 | COMMITTEE UPDATE
An opportunity to update the Committee on relevant information and report on any meetings of external organisations attended since the last meeting of the Committee. This is particularly pertinent to members who act in a liaison capacity with NHS Boards and for District Representatives. | 10.35am | |
| 7 | JOINT STRATEGIC NEEDS ASSESSMENT
The Buckinghamshire Health & Wellbeing Board is in the process of refreshing the Joint Strategic Needs Assessment (JSNA) for 2016-2020. Members will receive an update on the refreshed JSNA.

Attendees:

Jane O'Grady, Director of Public Health
Emily Youngman, Consultant in Public Health Medicine | 10.40am | 13 - 16 |
| 8 | JOINT HEALTH & WELLBEING STRATEGY
The Health & Wellbeing Board is refreshing the strategy at a time when the health and care system in Buckinghamshire is operating under significant budget pressures, combined with increased demand for local services. The Strategy also informs the NHS Five Year Forward View and aligns with the Buckinghamshire chapter of the Buckinghamshire, Oxfordshire and Berkshire West Sustainability & Transformation Plans.

Attendees:

Jane O'Grady, Director of Public Health
Katie McDonald, Health & Wellbeing Lead Officer | 11.00am | 17 - 24 |
| 9 | ACTIVE BUCKS
The purposed of this item is to provide information about the progress of the Active Bucks project which is due to complete delivery in September 2017. | 11.20am | 25 - 30 |

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Attendees:

Jane O’Grady, Director of Public Health
Sarah Preston, Public Health Principal

10 VASCULAR SERVICES UPDATE

11.40am

At its September meeting, Members of the Committee received a presentation on the PROM (Patient Reported Outcome Measures) project as part of the vascular services reconfiguration. Members will receive a verbal update on the progress of the PROM project.

Attendees:

Aarti Chapman, Associate Director, Strategic Clinical Network and Senate
Cliodhna Ni Ghuidhir, Thames Valley Vascular Network and Service Manager, Oxford University Hospitals NHS Foundation Trust
Annie Tysom, Senior Communications and Engagement Manager

11 INQUIRY RECOMMENDATION MONITORING

12 noon 31 - 38

For Members to receive a six month update on the recommendations which were made as part of an inquiry into “Accessibility and promotion of services for Adults with Learning Disabilities”. The attached table shows the progress of the recommendations (the text in red shows the progress).

Members to agree to delegate the assigning of the RAG status to the Chairman following the meeting.

Attendees:

Mike Appleyard, Deputy Leader and Cabinet Member for Adults and Health & Wellbeing
Oliver Stykuc-Dean, Commissioner – Early Intervention and Prevention

12 COMMITTEE WORK PROGRAMME

12.20pm 39 - 40

For Members to discuss and agree the items for forthcoming meetings.

13 DATE AND TIME OF NEXT MEETING

12.30pm

There will be a special meeting on Tuesday 21st February at 10am in the Large Dining Room, Judges Lodgings,

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Aylesbury. This meeting will be to review the Buckinghamshire, Oxfordshire and Berkshire West Sustainability and Transformation Plan.

Purpose of the committee

The role of the Health and Adult Social Care Select Committee is to hold decision-makers to account for improving outcomes and services for Buckinghamshire.

It shall have the power to scrutinise all issues in relation to Health and Adult Social Care. This will include, but not exclusively, responsibility for scrutinising issues in relation to:

- Public health and wellbeing
- NHS services
- Health and social care commissioning
- GPs and medical centres
- Dental Practices
- Health and social care performance
- Private health services
- Family wellbeing
- Adult social services
- Older people
- Adult safeguarding
- Physical and sensory services
- Learning disabilities
- Drugs and Alcohol Action Team (DAAT services)

** In accordance with the BCC Constitution, this Committee shall act as the designated Committee responsible for the scrutiny of health matters holding external health partners to account.*

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If you would like to attend a meeting, but need extra help to do so, for example because of a disability, please contact us as early as possible, so that we can try to put the right support in place.

For further information please contact: Liz Wheaton on 01296 383856 , email: ewheaton@buckscc.gov.uk

Members

Mr B Roberts (C)	Mr C Etholen
Mr R Reed (VC)	Mrs W Mallen
Mr B Adams	Ms R Vigor-Hedderly
Mr C Adams	Julia Wassell
Mr N Brown	Vacancy
Mrs A Davies	

Co-opted Members

Ms T Jervis, Healthwatch Bucks
Mr A Green, Wycombe District Council
Ms S Jenkins, Aylesbury Vale District Council
Mr N Shepherd, Chiltern District Council
Dr W Matthews, South Bucks District Council

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Buckinghamshire County Council
Select Committee
 Health and Adult Social Care

Minutes *HEALTH AND ADULT SOCIAL CARE*
SELECT COMMITTEE

Minutes from the meeting held on Tuesday 18 October 2016, in Mezzanine Room 2, County Hall, Aylesbury, commencing at 10.00 am and concluding at 12.30 pm.

This meeting was webcast. To review the detailed discussions that took place, please see the webcast which can be found at <http://www.buckscc.public-i.tv/>
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MEMBERS PRESENT

Buckinghamshire County Council

Mr B Roberts (In the Chair)
 Mr R Reed, Mr B Adams, Mr C Adams, Mrs M Aston, Mr N Brown, Mrs W Mallen and Julia Wassell

District Councils

Ms T Jervis	Healthwatch Bucks
Mr A Green	Wycombe District Council
Ms S Jenkins	Aylesbury Vale District Council
Mr N Shepherd	Chiltern District Council
Dr W Matthews	South Bucks District Council

Others in Attendance

Mrs E Wheaton, Committee and Governance Adviser
 Ms L Patten, Chief Officer, Aylesbury Vale Clinical Commissioning Group
 Mr R Majilton, Director of Sustainability and Transformation
 Ms S Payne, Head of Customer Experience and Communications
 Ms D Wolfson, Director Of Joint Commissioning

1 APOLOGIES FOR ABSENCE / CHANGES IN MEMBERSHIP

Apologies were received from Mr C Etholen and Mrs S Jenkins.

2 DECLARATIONS OF INTEREST

There were no declarations of interest.



3 MINUTES

The minutes of the meeting held on Tuesday 6 September were confirmed as a correct record.

Follow-up on actions

- Item 4 – the Committee & Governance Adviser confirmed that a discussion had taken place with the Clinical Commissioning Groups in terms of a consistent approach to reporting trends.
- Item 6 - Bedfordshire and Milton Keynes Healthcare review – representatives had been invited to attend this meeting to discuss the STP plans for this footprint but no-one had confirmed their attendance.
- Item 8 – NHS England had been invited to a future meeting to update the Committee on the results of the ongoing research.
- Item 9 – Committee Members had been invited to attend provider meetings but due to limited room capacity were unable to attend.

4 PUBLIC QUESTIONS

There were no public questions.

5 CHAIRMAN'S UPDATE

The Chairman reported the following:

- **Pharmacy cuts** – having reported at the last meeting that the proposed cuts had been withdrawn, the latest position showed that the Government were now re-considering the cuts. The Chairman asked for the Committee's agreement to write to the local MPs asking for a current situation on this issue.

ACTION: Chairman to send a letter to the local MPs in relation to the proposed pharmacy cuts asking them to confirm the current position.

- **Clinical Commissioning Group AGM** – the Chairman reported that he had attended the recent AGM and mentioned the over 75s initiative which was currently being trialled, the digitalisation of patient records, current financial pressures within the system and a question from one of the delegates around when the STP would be published (item on the agenda for this meeting).
- **Bucks Healthcare Trust AGM** – the Committee & Governance Adviser attended on behalf of the Chairman and the following areas of improvement were mentioned – Urgent Care, Patient Experience, Care Quality Commission rates BHT as “requires improvement” but now looking to move this towards a “good” rating. Key areas of focus for BHT - Musculoskeletal services, Diabetes, Cardiac and stroke services, community hubs and teams and innovation.
- **The Bedfordshire and Milton Keynes Healthcare Review** – there will be a meeting on Monday 14th November in Bedford to discuss the Bedfordshire and Milton Keynes Healthcare review and the continuation of some of its work as part of the STP process.

ACTION: Committee Members to let Mrs Wheaton know if they are intending to attend this meeting.

6 COMMITTEE UPDATE

District Councillor Dr Matthews reported back on the care visits which she attended with a

care manager from Prime Care – no major concerns were reported.

7 STRATEGIC SYSTEM PLANNING - UPDATE

The Chairman welcomed Ms L Patten, Chief Officer, Clinical Commissioning Groups, Mr R Majilton, Deputy Chief Officer, Clinical Commissioning Groups and Mrs S Payne, Head of Customer Experience and Communications. Apologies were received from Mr Raj Bajwa.

The item was separated into three areas:

- An update on the NHS Plan including the Sustainability and Transformation Plan;
- New models of care;
- The engagement exercise.

Mr Majilton took Members through his presentation and made the following main points:

- There were 44 Sustainability & Transformation Plans (STPs) footprints across England largely based on patient flows into tertiary acute hospitals.
- Buckinghamshire was part of the Buckinghamshire, Oxfordshire and Berkshire West (BOBW) 'footprint'.
- The STP was being developed "bottom up" and represented a small proportion of the Bucks health & care system.
- The main plan was being developed locally across the health & care system – the Bucks 'chapter' built on work already ongoing.
- The Bucks 'chapter' continued to progress Buckinghamshire's health and care system approach to developing plans under the leadership of Healthy Bucks Leaders' Group which included representatives from the Clinical Commissioning Groups, the Local Authority and the Hospital Trust.
- Considerable transformation of NHS services nationally and locally was required to meet three identified gaps – health & wellbeing, quality and finance & efficiency.
- The focus was on reducing spend on bed-based care into prevention and care at home. It required a shift in funding from bed-base to community services.
- The Plan built on the priorities identified in the Health & Wellbeing Strategy and the Joint Strategic Needs Assessment. A number of programme workstreams had been set-up to deliver the specific aims of the Plan.
- A Transformation Delivery Group had been set up to oversee the progress on the delivery of the workstreams.
- There was a Thames Valley Urgent Care network which focused on reducing lengths of stay in Hospitals.
- The Clinical Commissioning Groups commissioning intentions were around the delivery of transformation and new models of care; the delivery of integrated community based services around a cornerstone of sustainable primary care; collaborative provider model of local primary and mental health and secondary care and commissioning the iMSK service and exploring a new model of care delivery for the Diabetes pathway.

Ms Patten provided an update on locality working and new models of care.

- The proposed new models of care built upon the Primary Care and Older People's strategy.
- People wanted more control over their care and wanted to be treated closer to home so this provided the focus for the health needs of the population.
- The two CCGS were divided into 7 localities – Aylesbury Vale North, Aylesbury Vale Central, Aylesbury Vale South, Amersham and Chesham, Wycombe, South locality and Wooburn locality.
- The community hub was described as integrated services tailored to the population.

GPs were determining their community hub size based on the health needs of their population which varied across the localities.

- Providing care outside of the Hospital required a shift in resource which must be at scale and take costs out at the same time. This would require additional investment in Primary Care and Community Services so that unplanned admissions would be reduced.
- Each Hub would work within a Bucks network, sharing expertise.
- Some services would be commissioned at a Bucks wide level thereby ensuring economies of scale.
- The CCGs had signalled the collaborative provider commissioning intentions across Bucks which would see GPs and the secondary care providers working together to develop integrated care solutions for their local population.

Ms Payne took Members through the engagement exercise and made the following main points:

- A comprehensive engagement plan for public, patients and key stakeholders was being developed.
- The plan would be aligned with and informed by the BOBW footprint and neighbouring footprints (eg. Bedfordshire, Milton Keynes and Luton).
- The engagement and communications process aimed to ensure that all key stakeholders and the public were provided with an opportunity to inform the conclusions reached during the development at local plans for health and care services. The process would ensure transparency and prepare for any formal consultation.
- Engagement would take place across the 7 localities and would, potentially, be followed by formal consultations dependent on the nature of the proposals.

SEE PAPERS AND WEBCAST FOR FULL CONTENT

8 COMMITTEE WORK PROGRAMME

Members agreed the items for the January meeting and noted the forward plan items.

9 DATE AND TIME OF NEXT MEETING

The next meeting is due to take place on Tuesday 24 January 2017 at 10am.

CHAIRMAN



Buckinghamshire County Council
Select Committee
 Health and Adult Social Care

Minutes

HEALTH AND ADULT SOCIAL CARE SELECT COMMITTEE

Minutes from the meeting held on Tuesday 29 November 2016, in Mezzanine Room 2, County Hall, Aylesbury, commencing at 10.00 am and concluding at 11.15 am.

This meeting was webcast. To review the detailed discussions that took place, please see the webcast which can be found at <http://www.buckscc.public-i.tv/>
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MEMBERS PRESENT

Buckinghamshire County Council

Mr B Roberts (In the Chair)
 Mr R Reed, Mr B Adams, Mr C Adams, Mr N Brown, Mrs W Mallen and Julia Wassell

District Councils

Ms T Jervis	Healthwatch Bucks
Ms S Jenkins	Aylesbury Vale District Council
Mr N Shepherd	Chiltern District Council

Others in Attendance

Mrs E Wheaton, Committee and Governance Adviser

1 APOLOGIES FOR ABSENCE / CHANGES IN MEMBERSHIP

Apologies were received from Mrs M Aston, Mr C Etholen, Dr W Matthews and Mr T Green.

2 DECLARATIONS OF INTEREST

There were no declarations of interest.

3 DRAFT SCOPING DOCUMENT FOR HOSPITAL DISCHARGE INQUIRY

RESOLVED:

Members discussed the scoping document for the Hospital Discharge Inquiry and agreed the content of the scope.



4 DATE AND TIME OF NEXT MEETING

The next meeting will take place on Tuesday 24 January at 10am in the Large Dining Room, Judges Lodgings, Aylesbury.

CHAIRMAN



Buckinghamshire County Council
Select Committee
 Health and Adult Social Care

Report to the Health and Adult Social Care

Title:	Joint Strategic Needs Assessment
Committee date:	24 th January 2017
Author:	Jane O'Grady
Contact officer:	Emily Youngman, 01296 387309 & ecyoungman@buckscc.gov.uk
Cabinet Member sign-off:	Margaret Aston

Purpose of Agenda Item

Buckinghamshire Health and Wellbeing Board are in the process of refreshing the Joint Strategic Needs Assessment (JSNA) for 2016-2020.

This report is intended to provide an update on the JSNA 2016-2020 refresh for the Health and Adult Social Care Select Committee. This item is for information.

Background

Local authorities and clinical commissioning groups have equal and joint duties to prepare JSNAs, through the Health and Wellbeing Board. Local areas are free to undertake JSNAs in a way best suited to their local circumstances and to decide for themselves when to update or refresh JSNAs to ensure that they are able to inform local commissioning plans over time.

The JSNA assesses the current and future health, care and wellbeing needs of the local community to inform commissioning decisions with the aim of improving the health and wellbeing of the local community and reducing inequalities.

Summary

Refreshing the JSNA has been a collaborative process. The JSNA development group has been established comprising representatives from key stakeholders, including two representatives from each Business Unit (one commissioner and one Business Insight), as well as representatives from the CCGs and HealthWatch. The group has led the process of refreshing the JSNA on behalf of the Health and Wellbeing Board. The aim of the development group is to ensure the JSNA is up-to-date, accurate, accessible and useful to



stakeholders and to continue to develop the JSNA in to an innovative future facing, live resource.

In addition to updating the data, a number of developments have been agreed. In order to improve the usefulness and accuracy of the JSNA, we are moving to a continually updated, live JSNA, rather than one updated only every five years. Additional developments to improve the way the information is presented are also being explored. These include summaries, an interactive atlas, data sharing and linkage, and a greater public voice. The JSNA Development group will oversee these developments.

The structure of the JSNA is

- Executive summary
- Population
- Wider determinants of health
- Healthy lifestyles
- Children, young people and their families
- Adults
- Older people

The sign off process has involved uploading final drafts on to a BETA site for stakeholders to review prior to final sign off. All chapters have been complete, with the exception of the Wider Determinants of Health chapter, which is currently going through the final sign off process and the Executive Summary, which will be completed when all chapters have been finalised.

The JSNA can be found here:

<http://www.healthandwellbeingbucks.org/s4s/WhereILive/Council?pageId=2098>

The main findings from the completed JSNA chapters will be presented at the Select Committee meeting.

Key issues

- The JSNA is moving to a continually updated, live JSNA, rather than one updated only every five years
- The main findings from the completed JSNA chapters will be presented at the Select Committee meeting

Resource implications

The JSNA Development group will meet three times a year.

Next steps



- The JSNA development group will lead on the transition to a continually updated JSNA on behalf of the Health and Wellbeing Board.
- The next meeting of the group is on the 30th January 2017.





Buckinghamshire County Council
Select Committee
 Health and Adult Social Care

Report to the Health and Adult Social Care Select Committee

Title:	Joint Health and Wellbeing Strategy
Committee date:	24 th January 2017
Author:	Jane O'Grady
Contact officer:	Katie McDonald, 01296 382043 kamcdonald@buckscc.gov.uk
Cabinet Member sign-off:	Margaret Aston

Purpose of Agenda Item

The Health and Wellbeing Board has been seeking views on the refresh of the Joint Health and Wellbeing Strategy for Buckinghamshire which is due for publication in early 2017.

The Joint Health and Wellbeing Strategy is a responsibility of the local authority and local NHS clinical commissioning group partners to prepare and publish, through the Health and Wellbeing Board. The Health and Wellbeing Board is building on the priorities set out in the Joint Health and Wellbeing Strategy 2013-16 so that the strategy is fit for purpose for the next five years and is aligned with future plans across health and wellbeing partnerships in the county.

This report provides background information and context of the refreshed priorities to obtain views from the Health and Adult Social Care Select Committee and provide information on the next steps.

To note: This document sets out the refreshed priorities only. The Health and Wellbeing Board are agreeing action plans and progress monitoring on a continual process at themed meetings over the course of the year and will provide an annual report to HASC on progress.

Background information and approach for refreshing the Joint health and wellbeing strategy

Local authorities and clinical commissioning groups have equal and joint duties to prepare Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies, through the Health and Wellbeing Board. They are required to set out the shared vision for Health and Wellbeing across the whole county and present the high level priorities and outcomes to be



used as a basis to shape commissioning and coordinate action to work towards better health and wellbeing for the whole population.

The Health and Wellbeing Board's first Joint Health and Wellbeing Strategy published in 2013 put forward a shared vision to promote healthier lives for everyone in Buckinghamshire. Since publication the strategy has been the key overarching document for the Health and Wellbeing Board and commissioning activity across the county; setting the strategic context for partner organisations.

The vision for 2016 - 2021

The Health and Wellbeing Board is refreshing the strategy at a time when the health and care system in Buckinghamshire is operating under significant budget pressures, combined with increased demand for local services. The proposal set out for the refreshed JHWBS will continue to take the same life course approach but widen its potential further through a new emphasis on place and more explicit emphasis on mental health and reducing health inequalities.

The Strategy also informs the ambitions set out by local partners implementing the local plans for the [NHS Five Year Forward View](#) and align with the Buckinghamshire chapter of the Bucks, Oxford and West Berks Sustainable Transformation Plans. It will be delivered in the same timeframes, coordinating action to rebalance the health and social care spend to increase support for living, ageing and staying well, prevention and early intervention initiatives.

The Buckinghamshire Joint Health and Wellbeing Strategy aims to create the best conditions in Buckinghamshire for people to live healthy, happy and fulfilling lives and achieve their full potential. Our vision is to improve outcomes for the whole population as well as having a greater impact on improving the health and wellbeing of those people in Buckinghamshire who have poorer health and wellbeing.

The strategy proposes to make an impact on five key priority areas over the five years of the strategy.

- 1. Every child has the best start in life**
- 2. Keep people healthier for longer and reduce the impact of long term conditions**
- 3. Promote good mental health and wellbeing for everyone**
- 4. Protect residents from harm**
- 5. Support communities to enable people to achieve their potential and ensure Buckinghamshire remains a great place to live**



The following section sets out the refreshed priorities and focus for action for delivering the strategy.

1. *Every Child has the best start in life*

Why is this priority?

To get the best start in life we know that a baby's mother needs to be healthy before and during pregnancy and childbirth. What happens during the early years, starting in the womb, has lifelong effects on many aspects of a child's future health and wellbeing – from obesity, heart disease and mental health, to educational achievement and economic success.

As children enter school, the school environment and peers become an increasingly important influence. Adolescence is also an important time of development; the brain develops rapidly during early adolescence particularly those areas that deal with social relationships, taking risks and controlling feelings and emotions. At this time adolescents are susceptible to peer influence and risk taking which may have immediate and harmful consequences

The HWB focus for 2016 – 2021

Maternity: We will improve the health and wellbeing of mothers and their babies by:

- Supporting the adoption of healthy lifestyles for the whole family
- Ensuring good support for maternal and paternal mental health
- Early detection and support for people experiencing domestic violence
- Ensuring access to high quality parenting advice and support
- We will deliver targeted campaigns to raise awareness about the importance of antenatal care to all women and offer culturally sensitive information, advice and support to women from specific ethnic groups according to need.

Early years: We will support good health and development for all children in the early years by:

- Offering high quality early years parenting programmes and advice
- Commissioning a high quality healthy child programme
- Commissioning sufficient high quality accessible early years and childcare places
- Ensuring all parents have the advice they need to keep their children healthy and safe from harm



School years: We will support the physical, emotional and social wellbeing of children and young people by:

- Promoting a whole school approach to health and wellbeing
- Ensuring emotional resilience of young people is supported and developed
- Increasing the number of children and young people with a healthy weight by ensuring delivery of the national child weight measurement programme and actions to promote healthy eating
- Increasing the number of young people who are physically active through implementation of Active Bucks and the Bucks physical activity strategy and action plan
- We will help to reduce alcohol and substance misuse in younger people by providing good quality information and guidance to schools and wider actions as part of the Buckinghamshire substance misuse strategy.

Transition: We will improve the experience of services for all residents including key transitions through the life course by:

- Working closely with Children's Social Care and Learning and early engagement with services users, carers/families and providers to facilitate planning and commissioning, and ensure the timely sharing of data and intelligence.
- Supporting the delivery of the Special Educational Needs and Disabilities Strategy working to ensure that the transition from childhood to adolescence and through to adulthood is a good experience for every child and young person
- Supporting the delivery of the new joint Carers Strategy by identifying and supporting carers, especially those under the age of 16 and those over 75, and jointly reviewing the carers' pathway to ensure the provision of timely, accurate and good quality information to carers and professionals.

2. *Keep people healthier for longer and reduce the impact of long term conditions*

Why is this priority?

On average people in Buckinghamshire are healthier than the national average but too many are still suffering from avoidable diseases such as heart disease, cancer and diabetes. The risk of developing these conditions can be reduced by adopting a healthy lifestyle. For the many people who already have a long term condition we want to make it easier for them to look after their health and stay as well as possible. Smoking remains one of the biggest preventable causes of ill-health and early death with an estimated 560 smoking related deaths per year in Buckinghamshire

Not everyone in Buckinghamshire enjoys the same good health and people living in more deprived areas tend to have poorer health at all stages of life - from birth to old age. Health also differs between different ethnic groups. People with mental health problems often also experience poorer physical health. The strategy seeks to address these issues.

The HWB focus for 2016 – 2021:

Working age adults: We will help people stay healthier for longer and prevent the development of long term conditions by increasing levels of physical activity and healthy eating, reducing smoking and substance misuse and making healthier choices the easier choices. We will provide advice and support to people with Long Term Conditions to help them live well. We will do this by:

- Continuing to implement and promote the Active Bucks programme and updating the Buckinghamshire Physical Activity Strategy and action plan.
- Implementing the Buckinghamshire Healthy Eating Strategy
- Continuing to implement multi-agency actions to prevent the uptake of smoking and supporting smokers to quit.
- Implementing the Buckinghamshire Substance Misuse Strategy
- Delivering NHS Health Checks to identify people at increased risk of long term conditions and offering support to reduce that risk
- Integrating the promotion of healthy lifestyles as part of care for people with long term conditions
- We will create health and care and wellbeing pathways and facilities that actively promote healthy choices and behaviours
- We will ensure seamless care through further integration of services centred around the person in need with learning disability by working across our health and social care partnerships towards an integrated model and regularly review our services
- We will improve outcomes for everyone particularly those with poorer health, for example those living in deprived areas and those from certain ethnic groups by a range of measures including prevention and management of cardiovascular disease and seeking to understand what drives high hospitalisation rates for conditions which are usually managed in the community and through self-care
- We will carry out targeted interventions to tackle health inequalities in the uptake of lifestyle services in the most deprived parts of Buckinghamshire.

Older People We will seek to delay or prevent the development of long term conditions including dementia by supporting people to live healthy behaviours:



- We will support the care of frail older people by developing multi-speciality community provider teams based in community hubs and by redesigning community hospital care and reducing the need for acute hospitalisation.
- We will increase independence, mobility and years of active life for those aged 75+ using digital aids, equipment and adaptations and making tools for self-management available and easily accessible
- We will seek to identify/diagnose dementia at an early stage and support people, their families carers and communities to help them to manage their condition
- We will deliver preventative services in the community, including floating support and help older people to stay in touch with family and friends through the use of new technologies, for example; Face Time and Skype and other appropriate social media

3. Promote good mental health and wellbeing for everyone

Why is this priority?

Having good mental health is fundamental to our physical health and overall wellbeing and pivotal to relationships, successful employment and realising our full potential. Poor mental health is common; one in four people in the UK will experience poor mental health in the course of a year.

Half of all mental health problems start by the age of 14, rising to 75 per cent by age 24. Mental health and wellbeing support for children and families is key, including early support for women during pregnancy and the first few months post-birth, improved links with schools and better experiences for people as they move between children and adult services.

The HWB focus for 2016 – 2021

- We will improve maternal mental health by building effective screening for mental health issues in pregnancy and maternity pathways and ensure rapid access to effective intervention for all women who require it.
- We will improve infant, children and young people’s mental health and emotional wellbeing by delivering targeted support and ensuring access to CAMHS and early intervention services
- We will promote adult wellbeing and resilience in all partner work places as part of wider workplace health initiatives
- We will promote good mental health and emotional wellbeing by working in partnership to identify and work with groups who are vulnerable to poor mental health

- We will work with partners to improve the physical health of people with mental illness and/or learning disability.
- We will review existing services for people with mental health and substance misuse problems to improve outcomes for these people
- We will implement plans to reduce the risk of suicide and minimise self-harm

4. *Protecting residents from harm*

Why is this priority?

Protecting our residents from harm and ensuring all residents are safe is everybody's business. The Buckinghamshire Safeguarding Adults Board and the Buckinghamshire Safeguarding Children Board are committed to ensuring adults; children and young people feel safe and are protected from harm. It is a priority for the Health and Wellbeing Board to ensure consideration is given to safeguarding for both children and adults in everything we do.

The HWB focus for 2016-2017

- We will reduce child maltreatment by offering both universal and targeted services to address the underlying factors associated with child maltreatment and responding rapidly to address problems early. We will continue to implement our Ofsted improvement plan and Child Safeguarding Board priorities
- We will prevent Child Sexual Exploitation (CSE) by protecting those at risk and ensuring an appropriate multi-agency response through the delivery of the CSE Strategy and action plan 2016-17
- We will ensure robust safeguarding of adults
- We will improve joint working between agencies supporting people experiencing domestic violence and those experiencing mental health and substance misuse

5. *Support communities to enable people to achieve their potential and ensure Buckinghamshire remains a great place to live*

Why is this priority?

We know that having good friends and living in friendly communities is good for our physical and mental health whatever our age. We want to enable communities to support each other in times of need.

We also know that the physical environment, where we live, our communities and social networks have a strong influence on our overall health and wellbeing. As our population



ages we want to ensure that homes and neighbourhoods are designed to support people to lead fulfilling lives and stay independent for longer.

The HWB focus for 2016 – 2021

- We will work with communities to support thriving community life, including targeted work with the voluntary sector
- We will support people who need assistance with their health and care needs and connect them with local organisations and activities in their communities.
- We will support good design and quality homes with the provision of infrastructure to support healthy lifestyles such as safe green spaces, play areas, cycle and walking routes and flexible community facilities to improve health and wellbeing.
- We will ensure more people are living independently for longer by creating the best environments possible by supporting the development of high quality accommodation and premises for people with care and support needs and supporting the provision of lifetime homes and appropriate housing for older people in Buckinghamshire.
- We will work in partnership to deliver effective infrastructure for health and social care, which is flexible enough to meet changing needs and support new and innovative models of care

Key issues

- The Draft Joint Health and Wellbeing Strategy Refresh document was on line for consultation from 10 October to 2 December
- The refreshed priorities have been presented at a number of public meetings including the Health and Wellbeing Board, the CCG Governing Body and the Buckinghamshire Healthcare Trust Public Board public meeting
- The draft priorities have been agreed by lead commissioners at the Integrated Commissioning Executive Team meeting and Children’s Delivery Group meeting.
- An update on stakeholder engagement and feedback received to date will be provided at the meeting.

Next steps

- The final draft of the Joint Health and Wellbeing Strategy will be published and ratified by the Health and Wellbeing Board at the meeting on 9 March 2017
- The Health and Wellbeing Board is taking a new approach and piloting themed meetings as a proactive way of delivering the aims of the refreshed strategy.
- The first themed meeting is taking place on [12 January 2017 on mental health and wellbeing](#).





Buckinghamshire County Council Select Committee

Health and Adult Social Care Select Committee

Report to the Health and Adult Social Care Select Committee

Title:	Active Bucks
Committee date:	Tuesday 24 January 2017
Author:	Jane O'Grady, Director of Public Health
Contact officer:	Sarah Preston, Public Health Principal, spreston@buckscc.gov.uk , 01296 382539
Cabinet Member sign-off:	Margaret Aston, Cabinet Member for Community Engagement and Public Health

Purpose of Agenda Item

The purpose of this item is to provide information about the progress of the Active Bucks project which is due to complete delivery in September 2017.

Background – Why Promote Physical Activity

Being physically active is one of the keys to a long, happy and successful life. In our early years it plays a key role in brain and physical development, helps us develop social skills and make friends and promotes educational attainment and success. During our adult lives it helps give us the energy and health to enjoy life to the full and be productive at work. As we grow older being physically active slows the ageing process, keeping us fit, healthy and independent for longer.

Places with active communities tend to have better social connectedness, be safer, greener and wealthier as this report shows. Active communities are good for business and the taxpayer alike, increasing business productivity and reducing demands on health and social care services.

Despite all these benefits many of us are not active enough to benefit our health. Approximately half of all women and a third of men are not active enough for good health. Being inactive directly contributes to 1 in 6 deaths in the UK – equivalent to the harms from smoking - and around one fifth of adults in Buckinghamshire are currently inactive. The low levels of activity of our children are also concerning.



Physical Activity is a priority for the Health & Wellbeing Strategy and the Active Bucks project is a vital part of the prevention programme for the Care Act to support Buckinghamshire residents to live well through all stages of adulthood.

There is compelling evidence linking an active lifestyle to a range of health and wellbeing benefits.

Societal Benefits

- **Physical benefit** Direct benefits to physical health and has a positive influence on healthy behaviours, such as stopping smoking and drug use.
- **Emotional benefits** Benefits to psychological wellbeing and mental health.
- **Individual benefits** Character enriching traits gained through participation in physical activity, organised or informal e.g. life skills, social skills, team and individual values.
- **Social benefits** Playing sport or joining in an active game/mass participation event can support greater connectedness and social cohesion in communities.
- **Intellectual benefits** There is increasing evidence that physically active children have better educational attainment. For example, studies have shown that the GCSE results of active young people are 10-20% higher than those of inactive young people
- **Economic benefit** Being active can increase employment prospects and performance at work, not just through reduced costs from sickness and absenteeism. Physically active employees take 27% less sick days.
- **Environmental benefit** Benefits derived from more active forms of transport such as walking, cycling and reduced car use

Health Benefits - evidence shows that physical inactivity is a significant, independent risk factor for a range of long-term health conditions. For example, being physically active reduces your chance of type 2 diabetes by 40%, cardiovascular disease by 35%, and falls, depression and dementia by 30%. An active lifestyle provides clear benefits in the treatment, management or prevention of all of these conditions.

A NICE evidence review has reported that there is consistent evidence from good quality studies that Physical Activity in mid-life is related to:

- healthy and successful ageing outcomes,
- more positive outcomes in terms of disability and frailty in later life
- less risk of dementia in later life
- lower mortality in later life

The Blackfriars Consensus Statement, signed by fifty-nine organisations and experts from across the dementia and public health community, highlighted the need for a new national focus on the reduction of dementia risk. Increased physical activity will contribute to that reduction.



There are significant challenges to encouraging people to make lifestyle changes with barriers such as lack of time, financial costs, personal attitudes and behaviours, transport issues, and restrictions in the physical environment. Key approaches to increasing physical activity include:

- Building activity into everyday life
- Making being physically active the social norm
- Facilitating community engagement in physical activity
- Inspiring those who are inactive to engage in physical activity

The Active Bucks Project

The Active Bucks project was implemented in May 2015 and aims to:

- Support Bucks residents to increase their physical activity levels
- Increase the number of Bucks residents participating in a minimum of 150 minutes of moderate intensity physical activity each week
- Reduce the number of Bucks residents undertaking less than 30 minutes moderate intensity physical activity each week

The project seeks to deliver this by delivering large scale promotion and adoption of physical activity through:

- Utilising the role of members as community leaders
- Engaging communities to identify what physical activity communities want to participate in
- Providing evidence based and best practice physical activity interventions which deliver the Bucks Physical Activity Strategy
- Develop activities that are sustained past the end of the project

The project started with a community engagement phase between May and September 2015. The outcomes of the community engagement were reported at a countywide level and also at a local level to inform decisions about the physical activity programmes commissioned across the whole county and at a local level.

Physical activity is included in all Local Area Forum (LAF) Public Health profiles and has also been identified as a key preventative priority to address health inequalities. LAF's have played an active role in engaging residents, reviewing recommendations and deciding which activities to commission for their communities. Each LAF has been offered a physical activity package over 2 years to promote physical activity in their area, stimulating ideas and action from within the community. The physical activity programmes have been commissioned in 2 phases using learning from the first phase to inform the second phase which will have activities commencing between January and March 2017.



The countywide physical activity commissioned is being delivered in green spaces across the county and includes some activities which are not traditionally physical activity specifically aimed at beginners and those who are currently inactive.

All activity programmes have been developed with sustainability as a core component, to enable the activities to be sustained following the end of the funded period.

Some of the activity programmes that have already been delivered include: Rounders, Walk/Jog/Run groups, Family Cycling, Buggy Fit, Orienteering/Scavenger Hunt, Tai Chi/Pilates, Dads and Toddlers, Parent Fit, Strength and Balance, Flag Football. Walking Football, Social Ballroom, Multisport Activities, Yoga/Pilates, Bootcamp, Running Group, Nordic Walking, Simply Walks, Walking Netball, Dance. Bushcraft, Conservation, Environmental art, Mystery trail,

There are still some exciting activity programmes to come in 2017, including: Live Action Role Play (LARP), Quidditch, Scooter Skills, Parkrun/Junior Parkrun, Parkour, Flag Football. Walking Football, Social Ballroom, Yoga/Pilates, Bootcamp, Running Group, Nordic Walking, Simply Walks, Dance, Conservation, Photography lessons, Woodland/NERF games, Girl's Rugby, Cage Cricket, Playball, Futnet, Dog Agility, Art, Badminton, Handball, Table Tennis, Fire Fitness, Junior Tennis, and Gardening.

A small charge (£2) is made to attend some Active Bucks activities in order to support individual projects becoming self-sustaining, with many activities that do not require continued funding to be sustained being free.

A countywide Active Bucks promotional campaign was launched in June 16. www.activebucks.co.uk helps residents to find an activity of their choice that they will enjoy, within 20 minutes of their home or work, on a day and time that suits them, from a database of thousands of activities that charge a variety of prices, as well as the Active Bucks activities. The campaign offers a free first activity session from over 2500 different activities across Bucks, through registering for a voucher.

Key outcomes so far

An interim report on the first year of the project is expected in February 2016. The following interim outcomes for the first 6 months can be reported at this stage. All outcomes reported at this stage are for the activities funded by Active Bucks, and do not include outcomes from the additional activities listed on the Active Bucks website.

Community engagement

- Over 3500 residents have been engaged to understand what physical activity residents want to engage with, 70% of those engaged were not achieving the recommended activity levels.



- Mapping physical activity assets across the county to ensure no duplication of existing provision and to ensure key assets were used to support promotion, development and sustainability.

Physical activity delivery (first 7 months (May – Nov 16) of the 17 month project)

- 49 six month programmes of weekly activity completed
- 35 of these programmes (71%) have been sustained past the end of the funded period
- Over 1700 unique participants
- Nearly 10,000 attendances
- The programme has been success in attracting the target audience with 79% of participants were not achieving the recommended activity levels at registration, with 39% being classified as inactive.
- Wide age range engaged with 30% under 16 and 9.3% 65+ years
- 66% female, 34% male
- 8% have declared a long term condition or disability
- 83% are white, 4.8% mixed, 4.6% Asian or Asian British, 0.8% Black or Black/British

Community development

- 20 active community champions (volunteers) supporting promotion, delivery and sustainability of activities

Active Bucks Website

- Over 2500 activities across Bucks offering a first session free voucher
- Over 15,000 unique users
- Over 800 first session free voucher downloads

Participant feedback

- ‘Using Nordic walking poles has been very beneficial for me. When I first used them, my shoulders were very stiff and tight. After only a few sessions I felt much freer in using my upper body and am now using my shoulders to swing with the poles. It has increased my upper-body strength, my core muscles, my posture....it’s true, Nordic Walking turns a walk into a workout’
- Two ladies realised they were neighbours and created a friendship
- “I can’t think of anything whilst trying to breathe and run so I forget about the worries”
- “Rather be outside than inside on computer games”
- “Just had to tell you again how good yesterday's walk was. I felt so relaxed when I got home and was swinging my arms naturally and could even feel my feet walking properly. I was breathing easily too. For the first time in years didn't grit my teeth when asleep.”

- “For once I got up the hill easily - I did take my walking pole and kept myself upright and got up without being breathless. Yippee!”
- Following the sessions participants described feeling ‘buzzing’, energised, happy, tired, relaxed, in a good mood for the rest of the day, invigorated, less stressed, perspective

Sustainability

Funding is available for Active Bucks until September 2017. Sustainability is a key part of the Active Bucks model. Each activity has been commissioned with sustainability as an integral part of the delivery approach.

Public Health are exploring the opportunity of bidding for Sport England funding to be able to continue the project with a focus on residents over 55.

Next steps

Some physical activity delivery is currently in progress, the next main phase of physical activity delivery will commence between January and March 2017. All activity delivery will be complete by the end of September 2017. A full evaluation report is expected in February 2018.

We invite members of the select committee to continue to support the project to ensure all residents are aware of the opportunities available to them.

Response to Buckinghamshire Select Committee Inquiry

Select Committee Inquiry Title: Accessibility and promotion of Services for Adults with Learning Disabilities

Committee Chairman: Angela Macpherson

Date report submitted for response: 8th April

Lead BCC Cabinet Member (where response required from BCC Cabinet) and Lead Officer: Mike Appleyard and Kelly Taylor

Suggested frequency of future updates (e.g. 6 & 12 months): 6 months

Recommendation	Agreed Yes/No	BCC Cabinet / Partner Agency Response including proposed action	Responsible Cabinet Member (for BCC recs)	Responsible Officer	Action by date
Transport					
1. Buckinghamshire County Council should ensure that the experience of Adults with Learning Disabilities who use the college and day opportunity centre transport service is a core part of the contract monitoring process, and is reflected within the Key Performance Indicators for the Contract.	Yes	<ul style="list-style-type: none"> • Contract terms will be reviewed • Customer satisfaction feedback, via compliments/complaints and through surveys to be incorporated into performance management arrangements for all client transport services • Contract terms address standards of performance in providing stipulated services; providers are aware that customer satisfaction is material to our assessment of them. • The plan is also to conduct periodic surveys, to complement existing arrangements, from the New Year. 	Zahir Mohammed Mark Shaw to be lead Member (reflecting the transfer of client transport to TEE)	Andrew Bluck	August 16
2. Buckinghamshire County Council should coordinate learning disability awareness training for drivers within managed transport services, ensuring this training is annually refreshed and monitored.	Yes	<ul style="list-style-type: none"> • Safeguarding assurance procedures and the associated training package were revised and relaunched for 2016 and incorporates SEND/LD element • Training package will be further reviewed. • In hand and ongoing; the updated training element covering learning 	Mark Shaw	Andrew Bluck	Nov 16

		difficulties has recently been shared with CHASC colleagues for review.			
3. Buckinghamshire County Council should promote the importance of learning disability awareness training with local bus operators as part of the Council's role in improving disabled access on buses.	Yes	<ul style="list-style-type: none"> LDA training is already including in the new driver induction process for the main bus companies operating in Buckinghamshire. Existing training will be reviewed We are working with bus companies to include additional and refresher training via the Driver Certificate of Professional Competence which requires all bus drivers to complete 35 hours of additional training per 5 year period of their career. Public Transport team are engaging with the LD Partnership Board to address individual issues. This is an ongoing engagement with local bus operators. 	Mark Shaw	Andrew Bluck	
4. Buckinghamshire County Council, in conjunction with Buckinghamshire district councils, should promote the 'Fair4Aall' taxi scheme so that Adults with Learning Disabilities are supported to have trust and confidence in using taxi and mini-cab services safely.	Yes	<ul style="list-style-type: none"> Funding has been provided allowing BuDS to revamp the Fair4All website due to be completed by June 2016. The Public Transport Team will work with BuDS and AVDC to promote the current scheme more widely. Options to enhance the scheme will be considered jointly with AVDC. Support to this initiative is ongoing 	Mark Shaw	Andrew Bluck	
5. Buckinghamshire County Council should continue to invest in travel training – ensuring all appropriate Adults with Learning Disabilities can access this as part of the transition to independent living.	Yes	<ul style="list-style-type: none"> Further work required with colleagues across both CHASC and CSCL to establish a strategic, effective and cost effective approach Establishing suitable ownership of this workstrand a priority. A work-strand to be established under 	Zahir Mohammed	Andrew Bluck Mark Kemp, Programme Director, Supported Transport Programme	Oct 16 Draft plan by Dec 16

		the Supported Transport Programme, enabling CSCL and CHASC to develop and implement a strategic, effective and VFM plan.			
Accessibility of Information on Community Services					
6. Buckinghamshire County Council should ensure its web pages are accessible for all users, with Adults with Learning Disabilities seen as a priority group.	Yes	<ul style="list-style-type: none"> We are currently building a new set of webpages, designed to improve the overall experience and make content better for adults with learning disabilities As a result of the changes already made, we have reduced the number of issues with accessibility by 72% We expect the corporate website to have no significant accessibility issues by the end of the financial year 	Martin Phillips	Mathew Cain	February 2017 - review
7. Buckinghamshire County Council undertakes a digital service standards assessment of www.careadvicebuckinghamshire.org and the County Council web site in order to identify immediate, short and medium term priorities for ensuring it meets the needs of all users	Yes	<ul style="list-style-type: none"> An assessment has been made and reported to CID board in October 2016. It made 5 recommendations for the continued improvement on the website to better meet the needs of users We have also engaged the provider of the 'browse aloud' function to help improve the usability and performance reporting of the service 	Mike Appleyard	Mathew Cain	Review: October 2016
8. Buckinghamshire County Council to evaluate and consider investing in a dedicated Buckinghamshire venue guide for users with disabilities, working collaboratively with District Councils	Yes	<ul style="list-style-type: none"> Evaluation of DisabledGo proposal to produce dedicated venue guide has been completed. Fees range from £31,150 to £62,541 for 700 to 1500 venues and officer time of 1 week is required for establishment. We have reviewed our approach to promoting venues and events and developed a proposal for a single dataset which can be used across all BCC's web estate, and by the wider 	Martin Phillips	Mathew Cain	Review - Nov 2016

		<p>community, to promote venues and events relevant for people with disabilities</p> <ul style="list-style-type: none"> • CID board will review the findings from the prototype and user research and make a decision on whether to proceed 			
9. Buckinghamshire County Council should explore how information on community activities could be presented in a more dynamic format for example via a community portal	Yes	<ul style="list-style-type: none"> • We are taking this forward as part of the work to address point 8 	Martin Phillips	Mathew Cain	
10. Buckinghamshire County Council should develop an implementation plan that includes staff training and guidance to ensure effective compliance with the Accessible Information Standard (for Health and Social Care Services)	Yes	<ul style="list-style-type: none"> • We are raising awareness of the accessible information standard amongst all those who write for the web. We have put prominent posters on the wall so that people are aware of key principles and circulated these to all teams • As part of the internal customer and digital communications campaign, we will be distilling key messages and capturing case studies to show how • The specific requirements of the standard relate to the way data on communication preferences is captured in our line of business applications, which is a matter for the Business Unit working with ICT. 	Mike Appleyard	Mathew Cain	Jan 17: review
<p>34</p> <p>Ensuring Universal Community Services and facilities are in place to meet needs</p>					
11. Buckinghamshire County Council should review current community provision (not solely Council services) for adults with learning disabilities identifying needs, gaps in	Yes	<ul style="list-style-type: none"> • Work is in progress to review Learning Disability care and accommodation provision in Bucks. Commissioning is an ongoing cycle analysing and reviewing needs at the population level 	Mike Appleyard	Susie Yapp / Graeme Finch	Nov 2016

services and actions for how these will be met in the future.

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and identifying suitable ways in which this can be met. A Business case and action plan was presented and supported by PMO board outlining next steps and the rational for resource targeting. Development discussions are now to take place with key providers, the first scheduled for 14th Nov 2016, to clarify practical & support partnership needed to deliver objectives. A Strategic Intent document is to be produced in New financial year to demonstrate to market the aims and objectives of the modernisation of specialist accommodation in the county.

- Currently there are plans being developed and users and carers are being consulted as we look to re-provide respite accommodation to create sustainable and fit for purpose accommodation to meet current and future requirements.
- Work is also in progress engaging commissioners from adult social care, children social care and learning and the CCG to review the pathway of our service users through the life course and more closely integrate our thinking and planning to improve the experience of service users and their families at key transition points in their lives. This will ensure that strategic commissioning has appropriate data in a timely manner to ensure that the range of services required to meet needs in the most cost effective way, are developed.

TBC

36		<ul style="list-style-type: none"> Review the LD Commissioning Strategy: - There are a number of existing strategies that impact upon services for people with a Learning Disability; e.g. Housing, Children, Carers. In line with National drivers for the Transforming Care Agenda for people with Learning Disabilities and/or Autism, Buckinghamshire have an integrated 3 year plan in place: - http://www.aylesburyvaleccg.nhs.uk/wp-content/uploads/2016/06/Transforming-Care-Planning-Buckinghamshire-v10-final-submission-26072016.pdf By Summer 2017, Health and Social Care Commissioners intend to generate a high level document which pulls together 3 year commissioning intentions and priority areas from each of the aforementioned strands. 			2016/17
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Encouraging mainstream services to be more accessible

12.Buckinghamshire County Council should make its regular activities and services more accessible to adults with a learning disability e.g. its library services developing services that people with a learning disability could access	Yes	<ul style="list-style-type: none"> Included in business plan Prepare business case Visit Kent Libraries, see activities in action and gather further evidence Aim to develop 6 month project of activities, utilising existing resources, which will demonstrate impact Planning meeting with Helen Krauze from Talkback identified the following actions Library staff to visit and meet adults at Talkback and deliver a bag book session – date TBC Kent libraries session plan for 	Martin Phillips	David Jones / Fay Ewing	May 16 June 16 June/July 16
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		<p>Discovery tour to be used as template for tours in Bucks libraries</p> <ul style="list-style-type: none"> • Create a group library ticket for Talkback to borrow library items for use at Talkback / individual membership will also be encouraged • Job / volunteer role descriptions plus feedback from staff about current work experience and volunteering placements for adults with autism to develop future placements for adults with learning disabilities • Planning BCC Autism Awareness training for frontline library staff with Paulette Hunn – date TBC 			
Safeguarding					
13. Buckinghamshire Council to work with Local Safeguarding Boards to ensure safeguarding training and support by providers to service users with learning disabilities is provided with a particular focus on the following: avoiding exploitation, money management, relationship management and use of social media	Yes	<p>Work with the Safeguarding Adults Board to raise awareness and deliver training in relation to all aspects of exploitation of people with learning disabilities - Work still in progress, paper to be presented to BSAB in January 2017</p> <ul style="list-style-type: none"> • Engage Talk Back and the Learning Disability Partnership in developing a prevention strategy - BSAB & Talk back to progress this action by March 2017 via SAFE sub committee • Work alongside health and social care commissioners to identify/create roles/services aimed at supporting people with learning disabilities to develop and maintain essential life/independent living skills and reduce the risk of harm and exploitation • Engage Zita Calkin & BSAB BM by 	Mike Appleyard	Julie Puddephatt	

		March 2017 with Hertfordshire NHS Trust to identify current services in place and future shape of LD ILS services in order to prevent risk of harm & exploitation			
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Health & Adult Social Care Select Committee				
24 Jan 2017	Active Bucks	For Members to review the Active Bucks programme and to hear the plans for future activity,	Sarah Preston, Public Health Principal	
24 Jan 2017	Inquiry recommendation monitoring	For Members to receive an update on the progress on the recommendations made during the "Accessibility and Promotion of Services for Adults with Learning Disabilities" Inquiry which went to Cabinet in May 2016.	Kelly Taylor, Commissioner	
24 Jan 2017	Joint Health and Wellbeing Strategy	The joint health and wellbeing strategy 2016-2021 has recently been refreshed and views are currently being sought from the public (deadline for submitting comments is 22 November). Members will receive a report on the feedback from this engagement process.	Liz Wheaton, Committee and Governance Adviser	
24 Jan 2017	Joint Strategic Needs Assessment	For Members to receive and discuss the refreshed JSNA.	Jane O'Grady, Director of Public Health	
24 Jan 2017	Vascular Services - update	For Members to receive a progress report on the research results of the Patient Reported Outcome Measure (PROM) in relation to vascular services.	Liz Wheaton, Committee and Governance Adviser	

21 Feb 2017	Buckinghamshire, Oxfordshire and Berkshire West's Sustainability and Transformation Plan	For Committee Members to hear from health professionals who have been involved in preparing the BOBW STP and to question them on the content of the STP.	Liz Wheaton, Committee and Governance Adviser	
28 Mar 2017	Better Care Fund 2017-19	For Members to receive the plan for the Better Care Fund 2017-19.	Liz Wheaton, Committee and Governance Adviser	
28 Mar 2017	Dementia Services	A report went to Cabinet in May 2011 which highlighted the benefits of early diagnosis and services in place to support people with dementia. The Committee will now review how well the original recommendations have been embedded and the progress made to support the increased numbers of people with dementia.	Liz Wheaton, Committee and Governance Adviser	
28 Mar 2017	Diabetes	For Members to review the services people with diabetes receive across the County and to include a review of podiatry services for patients with diabetes.	Liz Wheaton, Committee and Governance Adviser	
28 Mar 2017	Musculoskeletal Services	For Committee Members to receive a presentation on the future plans for the musculoskeletal services.	Liz Wheaton, Committee and Governance Adviser	Attendees - Christine Campling and Jacci Shaw from Aylesbury Vale Clinical Commissioning Group.