

Minutes

MINUTES OF THE HEALTH AND WELLBEING BOARD HELD ON THURSDAY 20 NOVEMBER 2014, IN THE OCULUS, AYLESBURY VALE DISTRICT COUNCIL, THE GATEWAY, GATEHOUSE ROAD, AYLESBURY, HP19 8FF, COMMENCING AT 2.30 PM AND CONCLUDING AT 4.45 PM.

MEMBERS PRESENT

Ms J Adey (District Council Representative), Ms J Baker OBE (Healthwatch Bucks), Mrs P Birchley (Cabinet Member for Health and Wellbeing), Mr T Boyd (Strategic Director for Children and Young People), Mr C Etholen (Deputy Cabinet Member for Health and Wellbeing), Dr A Gamell (Chiltern Clinical Commissioning Group), Dr G Jackson (Aylesbury Vale Clinical Commissioning Group), Ms N Lester (Chiltern Clinical Commissioning Group), Dr J O'Grady (Director of Public Health), Ms L Patten (Aylesbury Vale Clinical Commissioning Group), Dr G Payne (Medical Director, NHS England Thames Valley Area Team), Dr J Sutton (Aylesbury Vale Clinical Commissioning Group) and Dr K West (Aylesbury Vale Clinical Commissioning Group)

OTHERS PRESENT

Mr M Appleyard (Deputy Leader and Cabinet Member for Education and Skills, BCC), Mr R Corbett (Chief Executive, Healthwatch Bucks), Ms K McDonald (Health and Wellbeing Lead Officer, BCC), Ms L Perkin (Programme Director for Integrated Care), Ms R Rothero (Strategic Director for Adults and Family Wellbeing), Mr A Stansfeld (Police and Crime Commissioner), Ms H Wailing (Democratic Services Officer) and Ms S Yapp (Interim Director for Commissioning and Service Improvement)

1 WELCOME AND APOLOGIES

Apologies for absence were received from Isobel Darby and Dr Stephen Murphy.

2 ANY ANNOUNCEMENTS FROM THE CHAIRMAN

The Chairman welcomed Anthony Stansfeld, Police and Crime Commissioner, who was in attendance as a guest.

The Chairman welcomed Richard Corbett, the new Chief Executive of Healthwatch Bucks.

The Chairman also welcomed Mike Appleyard, Deputy Leader, who was covering the role of the Cabinet Member for Children's Services in the interim following Angela Macpherson's resignation.

3 DECLARATIONS OF INTEREST

There were no declarations of interest.

4 MINUTES OF THE MEETING HELD ON 18 SEPTEMBER 2014

The Minutes of the meeting held on 18 September 2014 were agreed and signed as a correct record.

Matters arising

Members discussed the style of not naming speakers in the Minutes, and it was agreed that speakers would be named in future but that draft Minutes should be circulated to all Board members before publication.

A member also asked if decisions made at meetings could be made clearer in the Minutes, and suggested that a summary frontsheet be attached.

5 PUBLIC QUESTIONS

There were no public questions.

6 OFSTED IMPROVEMENT PLAN UPDATE

Trevor Boyd told the Board that they had shared the draft Improvement Plan at the previous meeting. The Plan had now been finalised and had been submitted to Ofsted on 14 November 2014. They were now awaiting Ofsted's comments on the Plan.

The report showed the actions which had been taken prior to the Plan being submitted.

In regard to the financing of the interim Plan, Cabinet had voted for £4.8m of extra funding to go into Children's Services for base budget pressures. Cabinet had also voted for an additional £1m for the Improvement Plan. At full Council that day another £1.67m had been agreed for Children's Services. There would be ongoing revenue implications of the improvements.

Member comments

Dr Graham Jackson said that the list of actions was impressive. He said that they were already seeing change in the system regarding safeguarding. They would need to see it tracked.

Mike Appleyard said that referrals to Social Care services were clearly a very big issue, and that all partners were referring to Social Care. He asked how far they had got in ensuring that more information was submitted to Social Care with each referral.

Trevor Boyd said that the Multi Agency Safeguarding Hub (MASH) was already helping with this. They had re-issued a revised Thresholds Document and also had a multi-agency referral form.

Mike Appleyard asked if the volume of referrals had changed. Trevor Boyd said that they had seen more appropriate referrals coming through.

Mike Appleyard said that the first reactions from Ofsted were that they were impressed that the Council had been able to cope with the loss of the previous Strategic Director, and had been able to recruit quickly. Ofsted were also very pleased that the new Chairman of the Safeguarding Board was now in place, and that a lot of issues were being dealt with rapidly.

Trevor Boyd thanked all the Board members and BHT.

Dr Graham Jackson asked if there was a risk that a reduction in referrals to such a sensitive area could be dangerous for vulnerable individuals.

Trevor Boyd said that the suite of performance indicators that would be coming to the Board would include information on any trends.

Dr Annet Gamell said that she was pleased to hear about the increased funding for Children's Services. The volume of referrals was a problem, and was not being dealt with. A triage process was needed, and there was a need to understand referrals instead of controlling them.

Trevor Boyd said that a multi-agency referral formula helped the First Response Team to determine what level of help was required. At the next meeting the first performance suite would be presented, and they would hopefully see early trends.

Jenny Baker OBE asked if the MASH was engaging with the voluntary and community sector (VCS). Trevor Boyd said that the MASH did not have the VCS as part of the hub. However staff there were very aware of the 'Are you Safe?' service for children who were missing. Staff knew who the voluntary organisations were and how to engage with them.

Louise Patten said that in regard to referrals, it was important to ensure that there was relevant feedback (e.g. if a referral was not appropriate). They also needed a wider culture of feeding back to people.

Rachael Rothero asked if the Ofsted Improvement Plan addressed the themes from the Child Exploitation Report. Trevor Boyd said that the report did not address this but that Ofsted had praised the Council's approach to tackling sex exploitation. The Safeguarding Board had a working group on this too.

Agreed Action

David Johnston, the new Director of Children's Services would be attending the next HWB meeting and would present on the OFSTED Improvement Plan.

7 MENTAL HEALTH CONCORDAT

Susie Yapp told members that Kurt Moxley was on sick leave, and that she would be presenting this item.

The report explained the requirements of the national Mental Health Crisis Care Concordat, a national agreement published in February 2014.

The Concordat identified four strategic areas in which public services should work together to deliver a high quality response when people of all ages with mental health problems urgently needed help. The four areas were:

- Access to support before the crisis point
- Urgent and emergency access to crisis care (parity of esteem for mental health services)
- The right quality of treatment and care when in crisis (dignity was paramount)
- Recovery and staying well and preventing future crisis

A major element of the Concordat was a requirement for agencies to work together better. Police stations were being used as a place of safety, and there was a local protocol for when that might occur.

Representatives of Buckinghamshire organisations had come together at a regional Thames Valley Day on 17 September 2014 to draft joint plans of action. Chiltern CCG had taken the lead in Buckinghamshire. Dr Stephen Murphy had sent letters to all partners in September 2014, with the draft Action Plan.

Governance of the work was planned to be through the Mental Health Joint Commissioning Team, via JET Adults in the first instance, and through reporting to the Health and Wellbeing Board. A governance paper was going to JET Adults on 27 November 2014.

Member comments

Louise Patten asked how they would measure this work so that they could be assured it was working. Susie Yapp said that individual organisations already had performance measures in place, but that this was an ongoing development.

Louise Patten commented that she had not seen all the work collated, and Susie Yapp said that she would take this back.

Trevor Boyd said that they needed to see an action plan. He also said that he had had correspondence with Alan Baldwin (Assistant Chief Constable Neighbourhood Policing and Partnerships), and that his view was that Police stations should never be used as places of safety (2-5% of cases would be a reasonable amount, fewer for children). Currently 38% of cases involving adults used Police Stations as places of safety.

Trevor Boyd referred to conveyancing, and said that in 2014 so far there had been 1200 Section 136 cases. Assistant Chief Constable Alan Baldwin's view was that Police vehicles should not be used, except in exceptional circumstances (2-5% of cases).

In the previous year there had been about 555 cases in which Police had been called to establishments run by the Mental Health Trust to restrain people. Assistant Chief Constable Alan Baldwin felt that they needed to look at training for providers. A group needed to meet with the Assistant Chief Constable to look at capacity.

Louise Patten said that she agreed in principle, and said that these were often highly complex cases. Expertise was needed to drill down.

Rachael Rothero said that 38% was a shocking statistic. All of this presented a pressure for partners in a different way.

Dr Karen West said that Buckinghamshire had progressed in the previous year, with the new unit, and was now much more effective.

Susie Yapp said that she did think that they had made significant progress, but there still some issues, e.g. people being transported in Police caged vans. A starting point would be to look at what was in the Action Plan to date. Susie Yapp said that she supported the idea of a working group. If Police behaviour changed, what were the implications for Social Care and other services.

Dr Annet Gamell referred to the statistic for Section 136 use and said that Buckinghamshire used this a lot more than other areas. They needed to address where the gap was.

Dr Geoff Payne encouraged members to look at the Oxford experience around liaison and diversion.

Milton Keynes used Section 136 more than Buckinghamshire.

Dr Geoff Payne said that he had attended a workshop in September 2014 about the implications of using the word 'crisis,' and the need for eligibility criteria.

Rachael Rothero said that it was interesting to see the impact and content of the Action Plan for Buckinghamshire.

Dr Graham Jackson said that they were missing Primary Care from the list.

Rachael Rothero asked who handled Section 12 cases in Buckinghamshire. Susie Yapp said that these were handled by the out of hours GP service.

Jenny Baker OBE said that she was very pleased to see voluntary organisations feeding into the Concordat. Mental health issues were often top on the evidence coming to Healthwatch, and she suggested that a link be made with Healthwatch in regard to case studies.

The Health and Wellbeing Board:

- **Received the report;**
- **Supported the process for organisational sign-off;**
- **Supported the governance plan for the monitoring of progress against the Action Plan**
- **Agreed that a working group be set up – Action: TB**

8 UPDATE ON THE BETTER CARE FUND SUBMISSION.

Lesley Perkin told the Board that the Better Care Fund (BCF) Plan had been submitted in September 2014.

There were four levels of approval for plans.

Nationally, five plans had been approved completely. 90 Plans had been approved with support (including the Buckinghamshire Plan).

The message for Buckinghamshire was that they had a few tweaks to make but that they were not material. Lesley Perkin had been working to make the changes. The completed actions would be resubmitted at the end of the following week.

The next step was to embark on building a full business case, particularly on tiers three and four of the model. They had had many discussions to put more 'flesh on the bones.' That would be completed by Christmas 2014.

There would also be work on the more practical parts (e.g. a Section 75 pooled budget, using a national template).

Member comments

Patricia Birchley said that earlier in the week she and Mike Appleyard had gone to a County Council Network meeting, where Jon Rouse (Director General, Social Care, Local Government and Care Partnerships, Department of Health) and Jeremy Hunt (Secretary of State for Health) had spoken. They had said that different partners would be responsible for different parts of the system. There would be a local approach.

Louise Patten said that at the previous meeting they had made a number of adjustments to the risk register, and asked where that had gone. Lesley Perkin said that the risk register would be taken to the Programme Board, and the minutes of the Programme Board would come to the Health and Wellbeing Board.

Most risks they had discussed at the previous meeting were around the operation of the BCF.

Rachael Rothero asked if Buckinghamshire would have to 'jump through more hurdles' in regard to submitting the information upwards. Lesley Perkin said that the Buckinghamshire Plan went to the Local Area Team. Nationally, this process was about supporting people to get an approved plan. Implementation was the ideal goal.

Dr Geoff Payne said that they had met that day with both CCGs and that the Area Team felt quite assured.

Rachael Rothero said that she assumed that the proposal around the Section 75 agreement would come back to the Health and Wellbeing Board. Lesley Perkin said that it would be coming to the January 2015 meeting. The plan was that versions of all the documents would be in place by the end of 2014.

Action agreed: Lesley Perkin to circulate notes from the Integration Programme Board on the BCF Risk Register to Health and Wellbeing Board members.

9 DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT

Dr Jane O'Grady took members through some slides and said the following:

- The Director of Public Health had a statutory duty to write an annual report reviewing the health of the local population. The content, focus and structure of the report was decided locally.
- They had decided to move to themed reports. This report focused on the health of children and young people in Buckinghamshire.
- Children and young people made up 1 in 4 of the Buckinghamshire population.
- Positive experiences for children and young people set the foundations for future health, happiness and success. Adverse experiences (e.g. being exposed to domestic violence) set in train a cycle of poor outcomes.
- Pre-term births cost the public sector £1.24bn from birth to the age of 18. This figure doubled when society and parents' costs were included.
- Schools had been involved in working on the content of the report.
- They had worked with primary schools on healthy eating, and with secondary schools on issues which were important to them (emotional wellbeing, sexual health, alcohol and smoking). The views gathered were included in the report.
- Young people had also been challenged to come out with some campaigns. This had included a heart-wrenching emotional intelligence film and some 'top trumps' cards about sexual diseases.
- The Council was funding the development of a sexual health app, which was a very good way of involving young people in health promotion messages.
- The report had been designed to be read online.
- The eight overarching recommendations from the report were listed on pages 21-22.

Member comments

Dr Juliet Sutton said that the report was excellent, and covered quite a lot of things which they had already been working on in partnership (e.g. the maternity needs assessment).

In regard to low birth weight, there were shocking huge inequalities. This was a huge priority for CCGs and Public Health, and they needed to work hard together.

It was a slight shame that the CCGs had not seen the report before it came to the Board, as there were things they could have contributed.

Dr Juliet Sutton said that a girls' school in Buckinghamshire was in the top 10 for physical activity in the UK. This encouraged the culture of enjoying physical activity.

Dr Jane O'Grady said that the report was a conversation-piece. The report had gone to full Council that morning, and it would now go to the CCGs and BHT.

Mike Appleyard said that they were building a bridge with secondary headteachers via their students. Recently the Youth Parliament had presented their frustration about PSHE not fulfilling their wishes (they were not taught about the workplace, adult life or families). They had arranged for them to present to the whole body of headteachers too. Behind that were six senior employers (e.g. Pinewood), who supported the young people. This had been very successful.

It was very difficult to gain entrance to schools and to gain acceptance from headteachers. Mike Appleyard said that he wanted to particularly involve the Director of Public Health and the health community in all of that.

It was not clear if there were better correlations in other parts of the UK in regard to poverty.

Dr Jane O'Grady said that correlations were very good across the UK. Buckinghamshire was the eighth least-deprived Council in the UK and the adult health statistics in Buckinghamshire on the whole reflected that. They had found that smoking cessation in midwifery needed to be improved.

Louise Patten referred to the role of schools and said that they needed to get teachers involved, e.g. PSHE teachers, PE teachers trained in smoking cessation and targets to reduce obesity. Louise Patten asked if they should ask Ofsted to have some performance indicators regarding links to health, and suggested that they write to Ofsted. Dr Jane O'Grady said that there was quite a lot of pressure on Ofsted, which was really crucial.

Dr Annet Gamell referred to early years and health visiting, and asked if things could be done before the responsibility for commissioning of health visitors changed. Dr Jane O'Grady said they could. Currently, they were busy transforming the school nursing service. They were carrying out electronic health questionnaires, to profile needs by school.

Anthony Stansfeld said that they were working to tackle child exploitation. They needed to be very conscious of FGM, which was more prevalent than they had expected.

Mike Appleyard said that the common thread was poverty.

Resolved

The Health and Wellbeing Board noted the Annual Report of the Director of Public Health and supporting data Supplement, reviewed the recommendations and discussed any actions required.

Agreed action: DPH and Director of Children's Services to explore lobbying OFSTED on behalf of the HWB for the inclusion of performance indicators assessing health and wellbeing education in PHSE lessons in schools.

10 DRAFT HEALTH AND WELLBEING BOARD GOVERNANCE AND ANNUAL REPORT AND WORK PROGRAMME

A discussion had previously been held about governance at the workshop meeting on 16 October 2014.

Agreed actions

Reporting Structure:

Members noted that there were still on-going conversations around governance and reporting in the HWB system. This would be taken forward with the HWB Planning Group / Healthy Bucks Leaders and those partnerships involved (CYP/Adult JETs etc.). Katie McDonald would be seeking feedback from the partnerships.

Providers on the Board:

HWB members agreed the best way forward is to align the future Strategic Health Liaison meetings (SHLM) dates with the HWB. The SHLM to meet before the HWB and SHLM provider members join the HWB so that the benefit of having providers involved in the discussion on HWB agenda items could be seen in practice.

It was agreed for the time being this would only include those providers who were currently members of the SHLM but membership and type of provider would be looked at again in the near future. It was recognised that defining providers and knowing which to include was complex and the Board would only be able to make an informed decision once it had piloted the inclusion of providers at future meetings.

Action: That the SHLM provider members be invited to join one of the first meetings in the New Year. The HWB is meeting on 5 March. Helen Wailing will check dates and confirm.

11 **AOB**

12 **DATE OF NEXT MEETING**

CHAIRMAN