

Minutes

MINUTES OF THE HEALTH AND WELLBEING BOARD HELD ON THURSDAY 28 JANUARY 2016, IN THE OLYMPIC ROOM, AVDC OFFICES, THE GATEWAY, GATEHOUSE ROAD, AYLESBURY, HP19 8FF, COMMENCING AT 10.30 AM AND CONCLUDING AT 12.30 PM.

MEMBERS PRESENT

Ms J Adey (District Council Representative), Mr M Appleyard, Ms J Baker OBE (Healthwatch Bucks), Mr T Boyd (Strategic Director for Adults and Family Wellbeing), Ms I Darby (District Council Representative), Dr A Gamell (Chiltern Clinical Commissioning Group), Lin Hazell (Cabinet Member for Children's Services), Mr D Johnston, Ms N Lester (Chiltern Clinical Commissioning Group), Dr J O'Grady (Director of Public Health), Ms L Patten (Aylesbury Vale Clinical Commissioning Group), Mr M Tett (Chairman) and Mr D Williams (Buckinghamshire Healthcare NHS Trust)

OTHERS PRESENT

Ms S Griffin (Secretary) and Ms S Woods (Chiltern District Council)

1 WELCOME & APOLOGIES

Apologies for absence were received from Ralph Bagge, Neil Dardis, Graham Jackson, Stephen Murphy and Juliet Sutton.

Sarah Woods, Performance and Policy Officer, Chiltern District Council, was welcomed to the meeting.

2 ANNOUNCEMENTS FROM THE CHAIRMAN

The Chairman explained that the meeting would not be webcast due to logistical reasons which were beyond the control of the Health and Wellbeing Board.

3 DECLARATIONS OF INTEREST

There were no declarations of interest

4 MINUTES OF THE MEETING HELD ON

The minutes of meeting held on 1 October 2015 were agreed as a correct record.

Matters Arising

The action plan relating to the Mental Health Crisis Care Concordat had been circulated. Trevor Boyd explained there was a partner group which met on a regular basis to discuss the issues around providing care for people in crisis with mental health issues. It was suggested that the Chairman write to the MHCC working group to seek assurance in relation to plan B and places of safety.

Action: Trevor Boyd/Graham Jackson

Item 7 – Health and Wellbeing Board Member Commissioning Intentions 2016-17 & update on Buckinghamshire JSNA

Lou Patten advised that a document that amalgamated commissioning intentions from different organisations to demonstrate the aligned strategic intent would be incorporated into the STP planning.

Item 8 – Annual reports from the Buckinghamshire Safeguarding Adults Board and Buckinghamshire Safeguarding Children's report

The Child Death Overview panel was making a recommendation around enhancing data collection and targeting service improvements. Ms Moss agreed to share this information with Board Members once it was available.

Action: Matilda Moss

Addendum: this information was circulated to Members via email on the 16 November 2015 and recirculated on the 3 February 2016.

Item 11 – update on Physical Activity Strategy and Active Bucks

Dr Jane O'Grady advised that work had taken place to find out what events were being offered in schools. The Sports Strategy was due to be published imminently following which talks would take place with all schools in Buckinghamshire.

The promotion of Physical Activity strategy is to be added to the agenda for the March meeting of the HWB.

Action: Member Services / Dr Jane O'Grady / David Johnson

5 PUBLIC QUESTIONS

There were no public questions.

6 HEALTH AND WELLBEING STRATEGY

Dr Jane O'Grady, Director of Public Health referred Members to her presentation which gave details of the responsibilities of Health and Wellbeing Board, its suggested priorities and what the next HWB strategy should include.

Members were advised that following the workshop that took place in December to discuss the refresh of the Health and Wellbeing Strategy, the proposed revised areas of focus were:

- Healthy Lives
- Children, young people and families
- Good health and wellbeing in adults and older people
- Healthy places, environments and thriving communities

It was identified that more detailed plans were needed to achieve the areas of focus with the strategy.

During discussion the following points were made.

- District Councillor Isobel Darby reminded Members that Planning Authorities were currently developing Local Plans. Ms Darby said it would be good for HWB Members to respond to the consultation/plans and give examples of areas of concern such as the provision of medical facilities etc.
- Ms Lou Patten, AVCCG advised that the AVCCG had responded to the Aylesbury Vale Plan.
- Mr Martin Tett, Chairman of the Board advised that Buckinghamshire County Council (BCC) had also responded to the AV Plan. Concern was raised was about the scattering of developments and services. It was easier to provide facilities if areas of development were more concentrated.

- Dr Annet Gamell, Chiltern CCG referred to Planning for Healthy Living and the reiterated the importance of the inclusion of green and blue spaces in developments. Dr Gamell expressed concern that services such as medical care were not factored in when planning was agreed and said that planning for generational growth, needs and life course was needed.
- Mr Tett explained that BCC is involved in the development of Woodlands near Aston Clinton and that the health aspects of this development had been looked at.
- Mr Tett referred to the Healthy Towns bid which would pilot a different approach to planning for health. The Woodlands development was the focus of the BCC bid. Mr Tett said he thought that funding had not been received but was interested in the learning from that. Dr O'Grady replied that even without the bid, there was work that could be done on the Woodlands project.

Action: Dr Jane O'Grady

- Dr O'Grady explained that the Healthy Communities Partnership held a workshop to look at Health and Wellbeing. The report from the workshop on areas to be addressed was awaited. A substantive item is needed at the HWB to discuss a joint response about issues such as small scale housing developments and how to influence current plans.

Action: HWB Planning Group

- Lin Hazell, Cabinet Member for Children's Services said that one simple factor developers tended to overlook was the provision of children's play areas. Local plans needed to include this provision as many children lived in an apartment or a home with a small garden or no garden. Dr O'Grady advised that the Natural Environment Partnership undertook a piece of work to look at green spaces in Wycombe, Aylesbury and Chesham which included public engagement around the improvement of specific green spaces. A copy of the report is to be sent to Members to see what action they could take in their respective areas.

Action: Dr Jane O'Grady

- Trevor Boyd, Managing Director, Communities, Health and Adult Social Care (CHASC) explained that the County Council was currently reviewing preventative services. A whole system approach was needed to address the prevention agenda.

A draft submission of key message for the input into Local Plans is to be compiled and circulated to HWB members for agreement.

Action: Dr Jane O'Grady

A timescale for the submission of the Health & Wellbeing Strategy, the Sustainability and Transformation Plan and the Better Care Fund is to be compiled and circulated to HWB members.

Action: Trevor Boyd

7 SUSTAINABILITY AND TRANSFORMATION PLAN

Lou Patten, AVCCG referred Board Members to her presentation and made the following main points.

- The NHS planning guidance, Delivering the Forward View: NHS planning guidance 2016/17 to 2020/21 asks every health and care system to produce its own Sustainability and Transformation Plan (STP).
- One of the first steps in this process will be for local health and care systems to agree their transformation footprint, the geographic scope of their STP, by 29 January 2016.
- STPs will cover the period between October 2016 and March 2021, and will be subject to formal assessment in July 2016 (following submission in June 2016).
- The STP will be the umbrella plan, holding underneath it a number of different specific delivery plans. Some of these would be on different geographical footprints.

- The STPs must cover all geographic areas of CCG and NHS England for commissioned activity (including specialised services and Primary Care) and demonstrate integration with local authority services, including prevention and social care

In terms of the size of the footprint, there are different levels of commissioning. There is the need to be mindful of what other organisations are doing and what makes sense for Buckinghamshire.

Strategic planning and transformational change is likely to require working arrangements at several different levels. Planning footprints should be large enough to enable the strategic planning decisions needed by 2020/21 to deliver sustainable health and care services, as outlined in the Forward View.

Local agreement is required to determine the level, shape and size of planning footprints.

Regardless of the complexity of the NHS Commissioning at scale, our main footprint is Buckinghamshire, co-terminus with our Local Authority. All activity will be monitored by our localities through health and social care 'hubs

Over 75% of our commissioning is undertaken across Thames Valley. Any significant Transformation will be planned and co-ordinated across this footprint, mainly because NHS England reporting structures are grouped this way

The timetable for the development of the System Transformation Plan is as follows.

Timetable	Date
Publish Planning guidance	22 December 2015
Publish 2016/17 indicative prices	By 22 December 2015
Issue commissioner allocations and technical annexes to planning guidance	Early January 2016
Launch consultation on standard contract, announce CQUIN and Quality premium	January 2016
Issue further process guidance on STPs	January 2016
Localities to submit proposals for STP footprints and volunteers for mental health and small DGHs trials	By 29 January 2016
First submission of full draft 16/17 Operational Plans	8 February 2016
National Tariff S118 consultation	January/February 2016
Publish National Tariff	March 2016
Boards of providers and commissioners approve budgets and final plans	By 31 March 2016
National deadline for signing of contracts	31 March 2016
Submission of final 16/17 Operational Plans, aligned with contracts	11 April 2016
Submission of full STPs	End June 2016
Assessment and Review of STPs	End July 2016

During discussion, the following points were made.

Mike Appleyard, Cabinet Member for Health and Wellbeing asked where planning for prevention fitted into the Sustainability and Transformation plans overall. Ms Patten said that prevention was part of the requirement of being sustainable. Prevention needed to be addressed first in order to be sustainable.

Dr Annet Gamell, Chiltern CCG added that sustainability was not just about a plan for provision; it was about transformation and incorporating a life plan for health and social care.

Mr Appleyard asked how this piece of work could be undertaken as one group of people rather than by several groups. Dr O'Grady said that this piece of work would be undertaken as part of the STP between now and June. There needed to be a whole system approach in terms of the thinking and provision around community development and prevention. Ms Patten added that a vision over a 5 year period was needed as well as a first year operational plan.

Members of the Health and Wellbeing Board agreed

- **the local planning system footprint would be Buckinghamshire**
- **to oversee the development of the Sustainability Transformation Plan, that would be developed through the Healthy Bucks Leaders Forum and reported to the Board.**

8 FUNDING SETTLEMENT UPDATE

Each organisation provided the following update on the Funding Settlement from the perspective of their own organisations.

Trevor Boyd, Managing Director, Communities, Health and Adult Social Care (CHASC), BCC

Revenue Support Grant

- A reduction of £18.1m in 16/17, £15.6m in 17/18, £9.7m in 18/19 and £9.4m in 19/20 (actually zero by 18/19)
- By 2019/20 funding of 87% will need to be raised via Council Tax which is a huge challenge

Social Care Precept

- Local authorities are able to levy a new social care precept of up to 2% on council tax to supplement adult social care costs.
- The 2% increases receipts by £4.7m in 16/17, £5m in 17/18, £5.3 in 18/19 and £5.6m in 19/20.
- This increase is subject to approval by Full Council who are due to meet on the 18 February 2016.

Better Care Fund (BCF)

- An increase of £1.5bn to the Better Care Fund with £800m of this coming from the New Homes Bonus.
- As the calculations for the BCF took into account the ability of the local authority to raise Social Care Precept, for Buckinghamshire this equates to £0 in 17/18, £0 in 18/19 and £875k in 19/20 of £1.5bn nationally (off-set by Social Care Precept).
- The Social Care Capital Grant is ceasing (approximately £1m) but the Disabled Facilities Grant is to be increased which will be delegated to Districts.

New Homes Bonus (NHB)

NHB starts reducing in 18/19 (6 years to 4 years). For BCC this means losses of £1.4m in 18/19 and £1.5m in 19/20.

Public Health Grant

- An announcement about the Public Health Grant is due in January.
- This grant is currently ringfenced.
- Under the new formula only 6 local authorities in the country receive a lower allocation than Bucks e.g. the Isles of Scilly and Rutland.
- The expectation is a cut of 14.6% over 4 years (16% real term).

Dr Jane O'Grady, Director of Public Health, BCC

- Cuts of 7.6% were expected in year 1.
- One challenge was that most of the Public Health budget was committed to contracts which have a 1 year notice period.
- The ringfencing of the Public Health Grant will be removed after 2 years.

Dr Annet Gamell, Chiltern Clinical Commissioning Group

- No additional funding had been made available for the CCGs.
- There were currently 209 CCGs in the country with one pot of funding.
- Savings of £22bn needed to be made by 2020. Finance directors have been tasked to look at possible savings.
- Chiltern CCG has had an uplift of our allocation to bring them nearer to our expected target.
- However, Chiltern still remains underfunded (by £16m) for our population. It is the 5th lowest funded CCG in the country (of 209). A practice had been acquired from East Berkshire, Taplow, which has merged with one of CCG practices. The appropriate funding comes with that change.
- The Chief Finance Officer is still analysing the detail of the allocation. What is clear is along with the growth comes requirements to fund historic items not included within this year's baseline i.e. CAMH, GPIT, national pensions uplift and last year's tariff uplift. Additionally the national NHS tariff had been inflated, and this along with population growth had to be covered from within these funds. Resilience was included in baseline from last year and this had to be protected. What on the surface appears an increase in funds in reality is not."

Lou Patten, Aylesbury Vale Clinical Commissioning Group

- For the first time the CCGs have an indicative idea of future funds
- There is the financial allocation of 3 years plus 2 indicative years
- 1.7% growth is anticipated which is in line with expectations
- Demographics are running at approximately 5%
- The Growth Fund will now have to cover services that were in the baseline last year
- There is a £25m underlying deficit across the whole of the system
- The expectation is the delivery 1% surplus which equates to savings of £9m

Members of the Health and Wellbeing Board agreed that a press release summarising the severity of the overall position facing the health economy in Buckinghamshire would be issued following the meeting.

9 BETTER CARE FUND

Trevor Boyd, Managing Director, Communities, Health and Adult Social Care (CHASC) referred Board Members to the paper on the Better Care Fund and made the following key points.

In 2015/16 the national allocation for the Better Care Fund (BCF) was £3.8bn. This was expected to increase to £3.9bn in 2016/17. The precise allocation for Buckinghamshire health and social care system had not been received but was expected to be similar to that in 2015 (£28,886).

As part of the 2016/17 BFC, the following two new conditions had been added for the use of the fund:

- The requirement for local areas to fund NHS commissioned out-of-hospital services
- The development of a clear, focused action plan for managing delayed transfers of care (DTC), including locally agreed targets.

It was expected that local systems would develop a clear set of commissioning and decommissioning priorities to support the integration of health and social care services that the BCF would support the delivery of.

The timeline for the sign off process is as follows.

- 8 February – the deadline for the first draft submission of BCF planning return

- A refresh was anticipated mid-March
- Mid to late April – submission of the final plan to be signed off by the HWB

Members of the HWB agreed the following.

- **A small sub group of officers (Rachael Rothero BCC, Ali Bulman BCC, John Lisle Chiltern CCG, Colin Thompson Aylesbury Vale CCG), would be given the responsibility of pulling together the draft document and ensuring sign off by the appropriate parent bodies / governance structure.**
- **The draft document would be circulated to HWB members predominately for information with a date for comments/response.**

10 UPDATE ON CHILDREN'S IMPROVEMENT PROGRAMME

The Chairman welcomed David Johnston, Managing Director Children's Social Care and Learning to the meeting.

During his presentation, Mr Johnston made the following key points.

- Following on from the 'inadequate' Ofsted inspection in August 2014, an Improvement Programme was set up to deliver the Improvement Plan.
- A multi agenda Improvement Board meets on a monthly basis to drive the delivery of the Improvement Plan. The Improvement Board includes representation from the CCGs, Bucks Healthcare Trust and Oxford Health.
- As part of the Improvement Programme, in October 2015, the County Council asked the Local Government Association (LGA) to undertake a Peer Review of Children's Safeguarding Services in Buckinghamshire to measure progress made since the Ofsted inspection. A multiagency team was involved in the Review. A number of strengths and improvements were identified; areas for further improvement included the pace of change and the need to ensure consistency of good social work practice. A specific recommendation was made in relation to the Health and Wellbeing Board 'whilst the Health and Wellbeing Board considers safeguarding issues, it is not yet consistently considering the commissioning implications'
- The Department for Education (DfE) visited the County Council in November 2015 to review progress. Discussions took place with managers, staff and partner agencies. The conclusion was that further case file auditing would be commissioned prior to a recommendation being made to the Minister.
- An Audit / Review was undertaken between 13 – 20 January 2016. Following the submission of the report, officials from Department of Education will send advice to the Minister on the nature of intervention they feel is now appropriate for the local authority. No issues of concern were raised around individual children.
- As a result of the Peer Review and the Audit, it was agreed that the Improvement Plan should be revised. This included reducing the original number of 6 workstreams to 4.
- In terms of KPIs and the number of contacts, there has been an increase in activity from some groups such as A&E/111 and 'other primary service'.
- The threshold document had been reviewed in autumn 2015. A use of multiagency document (MARF) was being promoted.
- The effectiveness of the Multi Agency Safeguarding Hub (MASH) was currently being looked into as well as the timescales for the receipt of information/material can be improved upon but the enhanced sharing of information and support from across the agencies has demonstrated improvements in partnership working.

During discussions the following points were made.

- David Williams, Director of Strategy and Business Development, Buckinghamshire Healthcare Trust (BHT), complimented Mr Johnston on his report. Mr Williams asked what

the focus of BHT should be over the next few months in terms of acute and community services. Mr Johnston said he would like to see greater involvement such as consistent agreement via the multiagency referral form and the provision of information requested as soon as possible.

- Nicola Lester, Chiltern CCG explained that there was a shortage of clinicians trained in safeguarding in general. A review was taking place of how best to deal with this issue.
- Mr Tett said the way in which partnership working was taking place had improved beyond recognition in a very short amount of time. Credit was given to those who had been involved in developing this partnership.
- Lou Pattern asked if the number of contacts received from Schools Nurses needed to be raised at the Improvement Board and reported back to the Health and Wellbeing Board. Mr Johnston said that reporting needed to be looked at as part of the revised Improvement Plan as it had been proposed that the Improvement Board would meet less frequently to allow partners and the chair of the Improvement Board to focus more on service development and quality assurance.

11 BUILDING THE RIGHT SUPPORT - NEXT STEPS FOR LEARNING DISABILITY SERVICES

The Chairman welcomed Zita Calkin, Senior Commissioner for Learning Disabilities to the meeting.

During her presentation, Ms Calkin made the following points.

The Transforming Care programme focuses on addressing long-standing issues in the care of people with Learning Disabilities to ensure sustained change that will see:

- More choice for people and their families, and more say in their care;
- More care provided in the community, with personalised support provided by multidisciplinary health and care teams;
- More innovative services to give people a range of care options, with personal budgets, so that care meets individuals' needs;
- More intensive support provided early for those who need it, so that they can stay in the community, close to home;
- That those in needs of in-patient care are receiving it only for as long as they need it.

'Building the Right Support' is a national plan to develop community services and close inpatient facilities for people with learning disabilities which has been jointly developed by NHS England, the Local Government Association (LGA), and the Association of Adult Social Services (ADASS).

- Local Authorities, Clinical Commissioning Groups and NHS England specialised commissioners are required to work together to form Transforming Care Partnerships (TCPs) to build up community services for people with learning disabilities and close unnecessary specialist inpatient provisions over the next 3 years and by the end of March 2019.
- Plans will need to be jointly agreed by all partners in the TCP.
- The development of the plans will also need to involve people with lived experience of inpatient services and their families/carers.

The timescale for implementation is as follows:

- January 2016–first meeting of the Local Transforming Care Partnership Board
- 8 February 2016–first draft of the Transformation Plan to be submitted to NHS regional teams
- March 2016–finalise the plans following regional and national moderation and feedback

- April 2016–begin to implement the plans

One of the requirements of the Transforming Care agenda was a register of all people with learning disabilities or autism who have mental health conditions or behaviour that challenges in NHS-funded care, who have either formerly been an inpatient or at risk of admission to a specialist hospital. This is estimated to be in the region of 100 people in Buckinghamshire. Buckinghamshire currently has 15 people with learning disabilities in specialist hospital settings, some of these are in secure hospitals. The provision of care for this cohort tends to be the most expensive and complex, ranging between £2000 and £7000 per week for a single bespoke unit or specialist residential care placement.

There are some challenges to address, including developing health and social care joint commissioning, funding and procurement processes and developing the market to ensure the right providers are available in Buckinghamshire.

During discussion the following points were made.

- Mr Boyd asked what assurance HWB members could be given about the governance process and the reporting structure of the Transforming Care Partnership Board. Ms Calkin said that in terms of the governance structure, membership of the Buckinghamshire Transforming Care Partnership Board included representation from CCG executives, Communities Health and Adult Social Care Board (CHASC) and childrens' services at the council. Updates would also be given to the Joint Executive Team (JET) BCC. Any joint working issues would come back to the Health and Wellbeing Board for discussion and HWB would be kept up to date with progress.
- Ms Hazell said that the management of the transition from children's services to adult services need to be expanded upon in the report. Ms Calkin explained that the Deputy SRO is the service manager for learning disability services, including the Transitions Service. In addition, joint health and social care commissioners for children and young people are members of the Transforming Care Partnership Board

An update on Learning Disability Services is to be given in 6 months.

Action: Zita Calkin

12 DATE OF NEXT MEETING

The next meeting is due to take place at 2pm on 17 March 2016 in Mezz Room 2, County Hall, Aylesbury.

Addendum – subsequent to this meeting, it was agreed that the next meeting of the Health and Wellbeing Board will take place at 2pm, 31 March 2016, Mezzanine 2, County Hall, Aylesbury.

CHAIRMAN