

Health and Wellbeing Board

Monday 22 July 2013 at 6.00 p.m.

in a Conference Room at the Council House, Walsall

Present:

- Councillor Z. Ali (Chair)
- Councillor R. Andrew
- Councillor R. Burley
- Councillor D. James
- Councillor I. Shires
- Councillor P.E. Smith
- Councillor Whyte
- Mr. J. Morris, Executive Director, Neighbourhoods
- Mr. J. Bolton, Interim Director Adult Services
- Ms. R. Collinson, Interim Director Children's Services
- Dr. I. Gillis, Director of Public Health
- Dr. A. Gill]
- Dr. D. Nair] Clinical Commissioning
- Dr. A. Suri] Group representatives
- Mr. T. Gallagher]
- Ms. D. Lytton, Healthwatch representative

31/13 Apologies

Apologies for non-attendance were submitted on behalf of Councillor Lane, Councillor D. Shires and Ms. S. Ali.

32/13 Substitutions

The following members substituted for the duration of the meeting:

- Councillor Whyte for Councillor Lane
- Councillor I. Shires for Councillor D. Shires
- Mr. T. Gallagher for Ms. S. Ali

33/13 Minutes

Resolved

That the minutes of the meeting held on 10 June 2013 copies having been sent to each member of the Board be approved and signed as a correct record.

34/13 Declarations of interest

There were no declarations of interest.

35/13 Local Government (Access to Information) Act, 1985

There were no items to be considered in private session.

36/13 Planning for Health

Mr. M. Smith, Regeneration Manager, Planning Policy gave a presentation which described ways in which health impacts were considered in planning processes. He commented that planning strategies provided a means to access a full range of opportunities to improve health such as open spaces, sports and leisure facilities, new housing, shops, jobs, etc.

A discussion took place during which time, Mr. Smith responded to questions and points of clarification. He undertook to speak to the Head of Planning on behalf of the Board to see whether the criteria for planning objections could include health. In addition, Mr. Smith said that he would ask the member working group overseeing the production of the Site Allocation Document to consider reporting arrangements including the Health and Wellbeing Board.

The Chairman thanked Mr. Smith for his presentation.

37/13 Health Wellbeing Board work programme

The Director of Public Health, Dr. I. Gillis presented a report which provided the work programme for the Health and Wellbeing Board:

(see annexed)

A discussion took place on the process for reviewing action plans which had already been approved. The Board accepted that its role was to ensure that there was a process in place rather than provide the performance management itself, however, it was considered that a six monthly update on actions to the Board would be reasonable.

In respect of the dates which were missing from the plan, the Board noted that the programme would be populated when the action plans had been agreed.

During the discussion, Dr. Gillis confirmed that the report requested at the last meeting setting out the process for updating the Joint Strategic Needs Assessment on a rolling basis would be submitted to the next meeting.

In response to points raised around inter-relationships to other bodies and Council partners, the Executive Director Neighbourhoods, Mr. J. Morris suggested that the Board look at this later in the year when the work of the Board was more established.

Resolved

(1) That the work programme be noted.

- (2) That actions plans be reviewed on a six monthly basis by the Board.
- (3) That the programme be populated with dates in time for the next meeting.

38/13 **Joint Health and Wellbeing Strategy – Action plans**

The Director of Public Health, Dr I. Gillis presented a report which contained the action plans for key recommendations within Sections 8, 9, 11 and 12 of the Joint Health and Wellbeing strategy:

(see annexed)

The Board discussed the action plans in detail during which time the following comments were made:

- Plans should be made “smarter”. Intentions should be clear and measurable and narrative up to date.
- Risk columns should include other options “Plan B”.
- Appendix 2 should have a strong link to adult social care.
- The action plan for recommendation 16 was not fully developed and may change depending upon the integration work (at item 12 on the agenda for this meeting).
- Good examples should be shared and celebrated.
- It would be useful for the Board to have more of an understanding of commissioning.

Further discussion took place more specifically about the availability of free health checks which the Board asked for more detail on.

In response to a question from Councillor Smith about how often private sector premises were inspected, Dr. Gillis said that she would find this out and write to Board members.

Resolved

- (1) That the action plans be amended as discussed and circulated to Board members for comment
- (2) That Mr. J. Morris be delegated authority to agree the action plans, in consultation with the Chairman, as amended at this meeting and any other minor revisions following circulation to Board members.
- (3) That a presentation be provided to the next meeting of the Health and Wellbeing Board in respect of the health check programme and its performance.

39/13 Public health allocation: Contracts and procurement 2013/14

The report to Cabinet was submitted to the Board for information:

(see annexed)

The Board discussed the report during which time the Executive Director, Neighbourhoods, Mr. J. Morris, pointed out that the Health and Wellbeing Board was responsible for ensuring that the contracts met the targets in the strategy not the operational detailed monitoring of them.

Dr. I. Gillis, Director of Public Health, responded to questions from members and explained the rationale for determining how the spending decisions had been made. She commented that the re-procurement of services identified in the report would provide an opportunity to assess whether it was an appropriate spend in order to inform decisions for the following year. It was noted that Dr. Gillis would be submitting a 6 month report on the contracts to the Health and Wellbeing Board to provide reassurance in the learning phase. Dr. Gillis advised that the Clinical Commissioning Group would monitor the performance of contracts subsequently and provide exception reporting to the Health and Wellbeing Board.

Resolved

That the Cabinet report be noted.

40/13 Process for review of Commissioning Plans

The Director of Public Health, Dr. I. Gillis presented a report which recommended the process by which reviews of commissioning plans might be undertaken:

(see annexed)

Resolved

That the process for assessing a Commissioning Plan as set out in paragraph 3.2 of the report be agreed.

41/13 Board membership

The Executive Director, Neighbourhoods, Mr. J. Morris, presented a report which informed members of a number of requests to join the Health and Wellbeing Board:

(see annexed)

The Board considered the requests and were persuaded that a place on the Board should be allocated to NHS England in view of its significant health commissioning responsibilities.

A lengthy discussion took place in respect of the remaining requests following which the Chairman put the following two options to the Board:

- (1) To accept the request from NHS England for a place on the Health and Wellbeing Board and that other requests be considered further when membership is reviewed for the next municipal year.
- (2) To accept all requests for membership of the Board.

A vote was taken on the options which clearly indicated option 1 as the preferred option.

Accordingly it was **moved** by the Chairman, duly seconded and:

Resolved

(1) **To recommend to Council**

That the composition of the Health and Wellbeing Board be amended to include a representative of NHS England in recognition of its significant health commissioning responsibilities.

- (2) That the requests for membership of the Health and Wellbeing Board by West Midlands Police, Walsall Voluntary Action and West Midlands Fire Service be noted at this time as there were other mechanisms available for engaging partners and other bodies.

- (3) That the membership be reviewed for the next municipal year.

42/13 Winterborne View

The Interim Director Adult Services, Mr. J. Bolton, presented a report which set out Walsall's response to the outcome of the investigation into abuse at Winterborne View Hospital:

(see annexed)

The Head of Joint Commissioning, Mr. A. Rust, said that the Joint Commissioning Unit provided a reassurance that the service in Walsall's homes was robust. All had had review plans and had been found to have the proper support. Mr. Rust and Mr. Bolton responded to questions from members during which time they explained the methods of inspection and monitoring.

Resolved

That the report be noted.

43/13 **Progress on integration between health and social care**

The Interim Director Adult Services, Mr. J. Bolton, presented a report outlining the current state of integrated services in Walsall:

(see annexed)

Mr. Bolton stressed the importance of this piece of work which would be looking at the long term future of Walsall services and which provided a means to develop those services accordingly. He referred to the four key areas which would further enhance the experience of older people in Walsall with better integrated services i.e. single point of access, risk stratification, multi-disciplinary locality working, and hospital discharge arrangements.

Members considered that the Board should look at each of the four key areas in more detail and it was:

Resolved

That a discussion on each of the four key areas identified in the report be included in the work programme, commencing with a report on the proposals for hospital discharge arrangements to the next meeting.

The meeting terminated at 9.00 p.m.

Chairman:

Date: