

## Health and Wellbeing Board

Monday 28 April 2014 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 J. Fitzpatrick
- Councillor D. James
- Councillor P. Lane
- Councillor D.A Shires
- Councillor P. E. Smith
- Mr. J. Morris, Executive Director Neighbourhoods
- Mr. K. Skerman, Interim Director Adult Services
- Ms. R. Collinson, Interim Director Children's Services
- Dr. B. Watt
- Dr. A. Gill ]
- Dr. D. Nair ] Clinical Commissioning
- Dr. R. Mohan ] Group representatives
- Ms. S. Ali ]
- Ms. D. Lytton, Healthwatch representative

**In attendance:**

- Ms. C. Boneham, Health and Wellbeing Programme Manager
- Mr. A. Harkness, Locum Consultant in Public Health

### 108/14 Apologies

Apologies for non-attendance were submitted on behalf of Dr. I. Gillis and Dr. A. Suri.

Dr. B. Watt attended in place of Dr. I. Gillis, Director of Public Health.

### 109/14 Minutes

#### Resolved

That the minutes of the meeting held on 3 March 2014 copies having been sent to each member of the Board be approved and signed as a correct record.

### 110/14 Declarations of interest

There were no declarations of interest.

## **111/14 Local Government (Access to Information) Act, 1985**

There were no items to be considered in private session.

## **112/14 Integration summit**

At this point in the meeting Mr. J. Morris, Executive Director, Neighbourhoods, reported that there would be an Integration Summit on 12 and 13 June 2014 at which members may have an opportunity to learn from others. Any members wishing to attend should contact Mrs. C. Boneham who would co-ordinate Walsall's presentation.

## **113/14 Urgent and emergency care strategy**

Dr. A. Rischie, Walsall Clinical Commissioning Group Urgent Care Lead presented a report updating on progress made towards the development of an Urgent and Emergency Care Strategy for Walsall:

(see annexed)

Dr. Rischie explained that the report had been considered by the Health Scrutiny and Performance Panel and that the draft consultation documents attached to the report set out the proposal. He circulated an options appraisal diagram which included the short list of options, the longer term vision and options for the walk-in centres in Walsall.

A lengthy discussion took place, particularly in respect of the options for the walk-in centre and the emergency urgent care centre at the Manor Hospital; and on the need to ensure more clarity for patients' to understand where to go for particular issues.

Councillor Smith was concerned that the process would lead to more services being based at the Manor Hospital and to the loss of Walsall's Accident and Emergency Department. He considered that there was a need for a walk-in facility in the areas of greatest need and particularly in the northern part of the borough.

Dr. Rischie responded that all comments would be included in the consultation process.

Mr. Morris commented that work was underway on integrating health and social care through the better care fund and so it was reasonable to foresee more integration, however, he felt that the options identified did not reflect this. He asked for the outcome of the consultation to be reported to the Health and Wellbeing Board at its meeting in July. In response, the Head of Joint Commissioning, Mr. A. Rust explained that these options were "mean-time" options which would inform longer term options for more integration.

Councillor Burley considered that GPs were key to taking the load off emergency care by being more accessible and a number of surgeries were part of health centres generally. Dr. Rischie explained that the Clinical Commissioning Group GPs were looking at this, although the bid to the government for additional funding had been unsuccessful.

Mrs. D. Lytton asked for a breakdown of the demographics of respondents to be shared with Healthwatch.

Ms. A. Ali advised the Board that the report had been submitted to the Clinical Commissioning Group governing body and that the content of the report had been supported with some minor amendments to the documents. Also, Ms. Ali said that the governing body had asked for an “easy read” version of the documents to be produced.

The Chairman thanked Dr. Rischie and it was:

**Resolved**

- (1) That the proposals set out in the report be noted.
- (2) That the Board note the public consultation plans to commence in May 2014.
- (3) That the Board note that the report was supported by the Clinical Commissioning Group governing body on 24 April 2014.
- (4) That further reports be received on the outcome of the public consultation commencing in May 2014 and on the development of the longer term strategy for urgent care services.

**114/14 Stroke review**

Mrs. N. Hussain, Project Director NHS, gave a presentation “Reviewing stroke services for a healthier future”:

(Presentation slides annexed)

Mrs. Hussain explained the background to the review and how decisions would be made to make any changes to the service; and she explained the communication and engagement plan. She concluded by confirming that by summer 2014, it would be known whether there would need to be a reconfiguration of the service and consequently public consultation.

Councillor Smith asked for assurance that the acute service would remain in Walsall. Mrs. Hussain explained the process but acknowledged that there was a possibility that Walsall could lose its service.

In response to other questions and points of clarification, Mrs. Hussain gave a broad indication of the volumes of patients which would be taken into consideration in the review. She also confirmed that a further report would be submitted to the Board late July/early August.

The Chairman thanked Mrs. Hussain for her presentation.

#### **115/14 Building capacities in communities – An assets based approach**

Mr. J. Morris, Executive Director, Neighbourhoods, introduced a presentation which explained the approach and how Area Partnerships had used the approach to improve health and wellbeing in their areas:

(Presentation slides annexed)

Dr. B Watt provided the detail of the presentation and responded to questions and points of clarification from members. She said that in Bentley an initial meeting had taken place with ward Councillors and GPs to explore common ground and this could be rolled out subject to capacity in the public health service.

Dr. Watt also explained the role of community advocates, being local residents who had a keen interest in the subject. Members commented that it was important to energise volunteers in order for the work to be sustained as key people tended to move on. Councillor Smith suggested that as community groups were relied upon more, there should be some form of training support for them, including the need to manage their expectations about what the Council could do and timescales for responses.

Dr. Nair said that he had asked for this presentation to be given to his Clinical Commissioning Group locality group and recommended that other locality groups do so.

Following a further short discussion, the Chairman thanked Mr. Morris and Dr. Watt for the presentation and asked for a standing item to be placed on Health and Wellbeing Board agendas to provide progress on Area Partnership initiatives.

#### **116/14 Joint Health and Wellbeing Strategy**

Ms. C. Boneham, Health and Wellbeing Programme Manager, presented a report setting out the refreshed Joint Health and Wellbeing Strategy for 2014/15:

(see annexed)

The Board discussed the report and refreshed strategy. In response to questions from members in respect of both the role of champions and also the reporting methods to the Health and Wellbeing Board from other statutory boards and vice versa. Mr. Morris reminded members that the Board had previously agreed to

take a fresh look at this and reporting to the Board generally in order to gain assurance and demonstrate progress on the recommendations. He said that he would be reporting on proposals in this respect to the next meeting.

### **Resolved**

- (1) That the refreshed Joint Health and Wellbeing Strategy for 2014/15 be approved.
- (2) That the 19 recommendations for action in 2014/15 be agreed.

### **117/14 Pharmaceutical needs assessment**

Mr. A. Harkness presented a report which set out the Board's responsibilities with regard to publishing and keeping up to date a Pharmaceutical Needs Assessment (PNA):

(see annexed)

The board discussed the requirements and next steps during which time Mr. Harkness gave reassurances in respect of the consultation and engagement process which would include local community groups. He also confirmed that pharmacies provided different levels of services ranging from essential to enhanced services.

Members considered that it would be useful for there to be an easily accessible map showing the category of service that each chemist provided and suggested that an easily recognisable category rating could be used by pharmacies. In the meantime, the Board was keen that there should be more communication and awareness raising from pharmacies in their community on the services they provide.

It was noted that the communication strategy was on the work plan, however, the Chairman asked for the strategy to be a high priority.

The Board also suggested that the review should look at the impact of services on the health and social care system and GPs as pharmacies played an important role to residents at home and in care homes.

### **Resolved**

- (1) That the review and development process for the existing and new pharmaceutical needs assessments as set out in paragraph 7 of the report be agreed.
- (2) That the timeline for development of the new pharmaceutical needs assessment as set out in paragraph 10 of the report be agreed.

## 118/14      **Health and Wellbeing Board – membership**

Mr. J. Morris, Executive Director, Neighbourhoods presented a report which gave the board an opportunity to consider its composition for the new municipal year:

(see annexed)

A lengthy discussion took place during which time members provided differing views about the membership and the benefits or otherwise of including additional representatives. The purpose and remit of the Board was discussed in order to help reach a consensus view.

During the discussion, it was **moved** by Councillor Lane and seconded by Councillor Burley:

That a representative of the Walsall Housing Partnership be included on the membership of the Board .

The motion was considered by the Board, however, Jamie Morris suggested that, as there was other partnership activity taking place, which the Board needed to be connected with in addition to those organisations listed in the report, a report should be prepared for the first meeting of the Board in the new municipal which:

- Confirmed the purpose and remit of the Board;
- Identified ways in which stakeholders were engaged in the work of the Board outside board meetings;
- Provided various options for future membership of the Board.

At this point in the meeting the time being 8.50 p.m., it was **moved** by Councillor James duly seconded and:

### **Resolved**

That Council procedure rules be suspended to enable the completion of the business on the agenda.

In summing up the debate the Chairman asked for a show of hands on the following proposals:

- (1) To receive a report and agree membership in the new municipal year.
- (2) To make a decision at this meeting on future membership.

On being put to the vote 9 members voted in favour of (1) above and 4 members voted in favour of (2) above. Accordingly it was:

## **Resolved**

That a report be prepared for the first meeting of the Board in the new municipal year which:

- Confirms the purpose and remit of the Board;
- Identifies ways in which stakeholders were engaged in the work of the Board outside board meetings;
- Provides various options for future membership of the Board.

## **119/14 Health and Wellbeing Board work programme**

Mrs. C. Boneham presented the Health and Wellbeing Board's work programmes for 2013/14 and 2014/15:

(see annexed)

## **Resolved**

That the Health and Wellbeing Board work programmes 2013/14 and 2014/15 be noted.

At this point in the meeting, as this would be the last meeting Councillor Ali would be chairing, Councillor Smith took the opportunity to thank him for this work for the Health and Wellbeing Board and the Shadow Board and for the way in which he had conducted meetings. Dr. A. Gill also thanked Councillor Ali on behalf of the Clinical Commissioning Group for his leadership during the establishment of the Board. Councillor James concurred on behalf of the Labour Group and wished Councillor Ali well for the future.

Councillor Ali responded and said that he also recognised the commitment of all Board members to meet the outcomes for residents.

The meeting terminated at 9.15 p.m.

Chairman:

Date: