

## **Health and Wellbeing Board**

**Wednesday 23 November 2016 at 6.00 pm**

**in a Conference Room at the Council House, Walsall**

**Present:** Councillor Robertson (Chair)  
Councillor C. Clews  
Councillor D. Coughlan  
Councillor R. Martin  
Councillor I. Shires  
Dr. U. Viswanathan, Consultant in Public Health Medicine  
Dr. P. Myers, Consultant in Public Health Medicine  
Ms. K. Allward, Head of Integrated Commissioning  
Ms. I. Vanderheeren, Group Manager, Children's Services  
Dr. A. Rischie (Vice-Chair) ] Clinical  
Mr. P. Maubach ] Commissioning  
Mr. M. Abel ] Group representatives  
Mr. S. Fogell, Healthwatch Walsall  
Ms. J. Arrowsmith, West Midlands Fire Service  
Ms. J. Clews, West Midlands Police  
Mr. A. Boys, Walsall Voluntary Action

**In attendance:** Ms. C. Boneham, Health and Wellbeing Programme Manager

### **347/16 Apologies**

Apologies for non-attendance were submitted on behalf of Councillor A. Ditta, Dr. B. Watt, Mr. D. Haley, Ms. P. Furnival and Mr. D. Baker.

### **348/16 Substitutions**

The Committee noted the following substitutions for this meeting only:

Ms. K. Allward for Ms. P. Furnival, Executive Director Adult Services  
Dr. U. Viswanathan/Dr. P. Myers for Dr B. Watt, Director of Public Health  
Ms. I. Vanderheeren for Mr. D. Hayley, Director of Children's Services  
Ms. J. Arrowsmith for Mr. B. Baker, West Midlands Fire Service

### **349/16 Declarations of interest**

There were no declarations of interest.

### **350/16 Local Government (Access to Information) Act, 1985**

There were no items to be considered in private session.

## 351/16 Better Care Fund 2016/17 Quarter 2 and year end forecast

Ms. K. Allward, Head of Integrated Commissioning presented the report:

(see annexed)

Mr Maubach questioned the presentation of the information, particularly that the report did not address the consequences of the underperformance. Ms Allward explained that this related to a continued increase in non-elective admissions and that a rationale for this would accompany the submission.

Members discussed the report during which time Ms Allward responded to concerns about a particular provider which was contracted to provide intermediate care services and said that this provider was one element in a service which was being reviewed to streamline provision and enable more flexible capacity thereby reducing cost.

Mrs Arrowsmith said that she was the health adviser for the West Midlands Fire Service and mentioned that the Fire Service was running a pilot scheme in Coventry, working closely with the Clinical Commissioning Group for the area on a 'home from hospital' service with follow-up 'safe and well' visits which was intended to avoid duplicating visits.

A further brief discussion took place on how the CCG and the Council were approaching the decommissioning of services. It was recognised that the development of the model of intermediate care needed to be approached in a collaborative way and that there remained the capacity to match demand.

Mr Maubach said that as a position statement for this year, he considered the report to be an accurate reflection of the position notwithstanding that there were issues about the scale and pace of delivery. He considered that there needed to be a radical overhaul of the Better Care Fund next year to refocus on some of the 'must do' activities, and that this should be considered by the Health and Wellbeing Board before March 2017. Mr Fogell, Healthwatch Walsall, stressed the need to engage service users, the voluntary sector and statutory partners in any review to ensure that the refreshed BCF was co-designed. He offered to Healthwatch support for this.

### **Resolved**

- (1) That the Better Care Fund 2016/17 Quarter Two performance be noted and submitted to NHS England by 25th November 2016.
- (2) That it be noted that the 2016/17 forecasted year end position of the Better Care Fund is a net under spend of £76,074 against the approved budget of £23,601,119.
- (3) To note that the current risk share of the under spend is as follows:
  - £278,925 under spend to Walsall Clinical Commissioning Group
  - £202,851 over spend to Walsall Metropolitan Borough Council.

- (4) That the underspend within the pooled budget should be applied as per the risk share.

The meeting terminated at 1.35pm

Chair:

Date: