Decisions of the Health & Well-Being Board

31 January 2013

Members:-

Cllr Helena Hart (Chairman)

- * Dr Andrew Howe
- * Councillor Andrew Harper
- * Councillor Sachin Rajput
- * Dr Charlotte Benjamin
 - nin * Dr Sue Sumners * Kate Kennally
- * David Riddle * Dr Clare Stephens
- * John Morton

1. MINUTES OF THE PREVIOUS MEETING (Agenda Item 1):

The minutes of the meeting held on 29 November 2012 were agreed as a correct record.

2. ABSENCE OF MEMBERS (Agenda Item 2):

Apologies for absence were received from Mathew Kendall.

3. DECLARATION OF MEMBERS' PERSONAL AND PREJUDICIAL INTERESTS (Agenda Item 3):

There were none.

4. ANY ITEMS THE CHAIRMAN DECIDES ARE URGENT (Agenda Item 4):

The Chairman reported receipt of a letter from Mr Stan Davison, Chairman of the Barnet 55+ Forum, asking how the Board would be responding to the Francis report on Patient Care at the Mid Staffordshire Hospital NHS Foundation Trust which was expected imminently.

Mr Morton and Dr Sumners gave an account of governance arrangements for quality and safety in the CCG, including a Quality and Clinical Risk Committee; a Director of Quality and Governance, and monthly meetings with provider Trusts and 1:1 meetings with their Nursing or Quality Directors, together with Action Planning around quality reports. In addition they were using both soft intelligence to build a complete picture in addition to formal reports.

RESOLVED:

That the Chairman writes to Mr Davison with assurances that quality and patient safety were of paramount importance to the Board, and for specific recommendations arising from the Francis report to be included in the Report on Quality and Safety that was scheduled for the 4 April 2013 Meeting of the Health & Wellbeing Board. The Chairman was also to write to the Chairman of the four main NHS Trusts serving Barnet (The Royal Free NHS Foundation Trust, Barnet & Chase Farm NHS Hospitals Trust, the Barnet, Enfield & Haringey Mental Health Trust and Central London Community Healthcare Trust) urging them to act on the findings of the Report and to confirm in writing to her the implications for their respective Trusts.

^{*} denotes Member Present

5. PUBLIC HEALTH COMMISSIONING INTENTIONS 2013-14 (Agenda Item 5):

The Director of Public Health, Barnet and Harrow, presented a paper on the commissioning intentions for public health in Barnet in 2013/14. His report outlined the budget that had been confirmed for public health and the contracts and services that would now fall within the remit of the Local Authority and how they supported the themes of the Health and Well Being Strategy. The Board welcomed this mapping as being integral to the entire Health and Well Being Strategy.

The Chairman- on behalf of the Board- welcomed the uplift form the original figure for the Public Health Budget and reported that the Council's Cabinet on 25th February 2013 would be formally agreeing the Commissioning Intentions and Memorandum of Understanding with the Clinical Commissioning Group.

Dr Howe reported that the budget was now sufficient to meet core commitments but that some contractual details were being finalised. In addition, there were still a few emerging issues being addressed around the Pharmaceutical Needs Assessment, guidance on Dental Public Health services and Infection Control. He further highlighted the intention to work across the West London alliance to realise efficiency savings and possible undertake joint procurement exercises. He also confirmed that all new investment would go into programmes properly costed against outcomes. Dr Howe also confirmed that the grant could be carried forwards.

With regards to Immunisation and Screening, Dr Howe reported that arrangements over immunisation and vaccinations fell under the remit of the new NHS Commissioning Board and he had held initial meetings. This was welcomed by the Board as it was one of the few targets in the Health and Well Being Strategy where Barnet's comparative performance was less good. It was also noted that, when established, the Commissioning Board would be a Member of this Board and able to be held to account.

RESOLVED

That the Board note the public health commissioning intentions for 2013/14.

6. SMOKING CESSATION/TOBACCO CONTROL (Agenda Item 6):

The Director of Public Health, Barnet and Harrow, together with Dr Jeffrey Lake from the Public Health team presented a report on actions to ensure that the targets in the Health and Well Being Strategy continued to be met-particularly around Smoking Cessation and Reducing Smoking In Pregnancy, as well as proposing a review of Tobacco Control measures. The report was one of the detailed follow up items to the Annual Report of the former Director of Public health considered by the Board in May 2012, this being one of the areas covered in detail that the Board wished reported to a future meeting.

It was further reported that the Public Health commissioning intentions made additional funding available for these activities.

The Board noted how the transfer of Public Health would make better links with other services such as Schools, Licensing and Trading Standards. The Director for People reported that under the proposed new Joint Venture for Development and Regulatory Services, the Council could require the provider to deliver three public health priorities each year and that a Tobacco Control network might be a suitable project to commission.

Dr Stephens highlighted the need for dedicated and trained midwifery support around smoking in pregnancy, particularly to younger mothers. It was agreed this should be part of the wider package of support to help them meet their challenges.

RESOLVED

That the Board supports the recommended actions to ensure continued performance of Smoking Cessation services with further targeted investment to reduce smoking in pregnancy and decrease the uptake of smoking amongst children.

7. BARNET AGEING WELL PROGRAMME 'ALTOGETHER BETTER' - BRIEFING ON PROGRESS AND PLAN FOR 2013/14 (Agenda Item 7):

The Director of Public Health, Barnet and Harrow presented an update report on the Ageing Well Programme, and an outline project plan for the next stage of the programme in 13/14 was circulated with the papers.

He introduced the Ageing Well project leads Ms Caroline Chant and Mr Stephen Craker, who outlined the neighbourhood level work being undertaken in East Finchley, Burnt Oak and Stonegrove, as well as Borough wide initiatives such as time-banking and intergenerational reading groups. The Board also commended making links with existing volunteer led provision and highlighted the need to continue to reach out to the widest range of communities, and to evaluate the neighbourhood work.

It was noted that Criminal Record Bureau (CRB) checks could be a disincentive to volunteers working with schools and youth groups. However it was hoped that the new more proportional procedures from Central Government would be rolled out locally.

RESOLVED

- 1. That the Board notes and welcomes progress on the Ageing Well programme
- 2. That the Project Plan for 13/14 be endorsed
- 3. That the Board note that individual business cases for each initiative would subsequently be approved by the Ageing Well Programme Boards and the Health and Well Being Board Financial Planning Sub Group.

8. REPORT OF THE CHILDREN AND YOUNG PEOPLE'S HEALTH OUTCOMES FORUM: IMPLICATIONS FOR BARNET (Agenda Item 8):

The Director for People, together with Vivienne Stimpson, Joint Head of Children's Commissioning, reported that the Department of Health had commissioned this Forum to make recommendations about the most important health outcomes for children and young people and how the new health system should ensure they are met. They presented this item to brief the Board on the main findings of the report and the potential implications for Barnet. It had already been considered by the Children's Trust Board in December 2012.

The Chairman wished it recorded that Barnet had met the proposal in the report for a designated Doctor and Nurse for Looked After Children.

The Director for People reported that organisational proposals were being developed for a whole system approach around Joint Commissioning of Children's Health Services.

RESOLVED:

- 1. That the Board note the developments in the report and their implication for Barnet, and support the following recommendations:
- 2. Clear arrangements for children's voices to be heard through Healthwatch should be in place, alongside an increased focus on the patient experience through commissioning.
- 3. Consideration of pre natal mental health pathways is included in the broader review of maternity services to be commissioned by NHS Barnet CCG.
- 4. The data locally available to assess the health needs of children with disabilities, looked after children and young people in contact with the youth justice system should be identified and included in the next iteration of the Joint Strategic Needs Assessment.
- 5. Formal Section 75 agreements to jointly commission health services for looked after children, occupational therapy and physiotherapy should be considered in 2013/14.
- 6. The Primary Care Strategy should consider what arrangements and local support offer are required to enable primary care settings to play a full role in services for children and young people.
- 7. Consideration should be given to developing a local health network to support the work of the Children's Trust Board and Health and Wellbeing Board

9. STRATEGIC DIRECTION FOR EARLY INTERVENTION AND PREVENTION (Agenda Item 9):

A report had been circulated setting out some key commitments and ways of working that underpinned the Council's strategic priority of Early Intervention and Prevention. The Director of People made a presentation setting out in more detail the key issues and how they related to the Marmot review, the work of the Board and the Health and Well-Being Strategy. She highlighted the range of partners involved and how information governance was being managed across partners.

Councillor Harper emphasised the cultural commitment to embed this work across the Council's Children's Service, and that while Barnet was undertaking trailblazing work on supporting Troubled Families, Early Intervention and Prevention was essential to tackling these issues at an earlier stage.

RESOLVED

That the report be noted and the strategic direction endorsed.

10. ROYAL FREE HOSPITAL - PROPOSED ACQUISITION OF BARNET AND CHASE FARM HOSPITAL (Agenda Item 10):

The Chief Officer, Barnet Clinical Commissioning Group, delivered a presentation on the latest status of the proposed acquisition of the Barnet and Chase Farm Hospital NHS Trust by the Royal Free NHS Foundation Trust. This set out the principles for a successful new organisation that would guide the process, ways of working during the period of the proposed acquisition, and the Business Case and expected benefits, together with the timetable for implementation.

In response to a question from Mrs Jordan on the level of patient and user consultation, Mr Morton reported that Foundation Trust governors were seen as representative of the community, but he would raise the matter and seek assurances at the relevant Board.

The Chairman reminded the Board that although the decision was a matter for the respective Trusts, she had sent a supportive letter on behalf of the Board at the last meeting and that a business item to the same effect at Council had received cross-party support.

RESOLVED

That the Board notes the position.

11. NATIONAL HEALTH SERVICE BUDGET PLANNING 2013/14 (Agenda Item 11):

The Chief Officer, Barnet Clinical Commissioning Group, delivered a presentation on NHS budget allocations for 13/14 and their likely impact on the health and care system in Barnet. As part of that he gave a breakdown of the CCG's Financial Plan for 13/14 and reported that a new Quality Improvement and Productivity Programme would be developed for 13/14.

It was noted that this was not the final position and some figures were being challenged. The biggest issue was to reduce the relatively high figure of budgetary spend on hospital services and it was noted that this mirrored the Council's challenge in reducing spend on acute and residential care.

It was agreed that at this stage the Chairman, with the assistance of the Director for People, send a letter to Mr Morton and Dr Sumners noting the position and offering the Board's support for any further discussions with the NHS National Commissioning Board.

RESOLVED

That the Board notes the position.

12. MINUTES OF FINANCIAL PLANNING SUB GROUP (Agenda Item 12):

The Director for People presented the minutes of the Financial Planning Sub Group held on 11th December 2012

RESOLVED

That the minutes be noted.

13. FORWARD WORK PROGRAMME (Agenda Item 13):

The Director for People presented a forward work programme for the 4 April 2013 meeting of the Board.

The Board requested that, if possible, the first Summit Meeting with the Partnership Boards, could take place in time for the outcome to be reported to the 4 April 2013 Board meeting.

RESOLVED

That the Forward Work Programme for 4 April 2013 be noted and that a Work Programme for 2013/14 be submitted to the next meeting.

The meeting finished at 11.00 am