

## Decisions of the Health & Wellbeing Board

12 November 2015

Board Members:-

\*Cllr Helena Hart (Chairman)

\*Dr Debbie Frost (Vice-Chairman)

\* Dr Charlotte Benjamin  
\* Dr Andrew Howe  
\* Chris Munday

\* Cllr Sachin Rajput  
Cllr Reuben Thompstone  
\* Regina Shakespeare  
\* Dr Clare Stephens

\* Dawn Wakeling  
\* Chris Miller  
Michael Rich  
John Atherton

Substitutes

\* Cllr David Longstaff

\* denotes (substitute) Member Present

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

The Chairman of the Health and Wellbeing Board, Councillor Helena Hart welcomed all attendants to the meeting. An update was received on the actions from the previous meeting:

Following comments from the Board, the JSNA executive summary has been updated to include reference to the positive achievements which have been delivered. The micro webpage for the JSNA 2015-2020 is being developed and is due to be launched in December.

### 2. ABSENCE OF MEMBERS (Agenda Item 2):

Apologies for absence were received from:

- Councillor Reuben Thompstone who was substituted by Councillor David Longstaff
- Michael Rich
- John Atherton

### 3. DECLARATION OF MEMBERS' INTERESTS (Agenda Item 3):

None.

### 4. REPORT OF THE MONITORING OFFICER (IF ANY) (Agenda Item 4):

None.

### 5. PUBLIC QUESTIONS AND COMMENTS (IF ANY) (Agenda Item 5):

None were received.

### 6. JOINT HEALTH AND WELLBEING STRATEGY (2015-20) INCLUDING PUBLIC

## **HEALTH REPORT ON ACTIVITY 2014/15 AND THE DEMENTIA MANIFESTO (Agenda Item 6):**

The Chairman introduced the item which sets out the final version of the Joint Health and Wellbeing Strategy (JHWB Strategy) (2015-2020), the production of which was one of the most important responsibilities of the HWB Board. The Chairman highlighted that the JHWB Strategy provides the framework and direction for local commissioning and service planning. She further drew attention to the Joint Foreword included in the Strategy - co-authored by the Vice-Chairman Dr Debbie Frost and herself - which reflected not only the truly joint nature of the Strategy but also the dedication of all partners on the HWB Board to its implementation.

It was noted that the Strategy has been informed by virtue of the feedback received during the public consultation period which took place from 17 September 2015 to 25 October 2015.

Both the Chairman and Vice-Chairman commended the contributions that all partners together with the voluntary and community sector groups and local residents have made towards the development of the JHWB Strategy which has been informed by the JSNA, in order to achieve the best possible outcomes for residents in Barnet.

Dr Andrew Howe was welcomed by the Chairman to make comments. Dr Howe thanked Zoë Garbett and Dawn Wakeling for their work on the Strategy. Dr Howe highlighted the continuity with the previous version of the Strategy and the focus on prevention and mental health being a thread throughout the Strategy. Dr Howe also noted that the Annual Report from Public Health (2014/15) is included as an appendix to the report.

The Board heard about the prevention and early intervention to slow the progress of further development of diseases as well as increasing individual responsibility and building resilience to improve health and wellbeing. Dawn Wakeling, Commissioning Director for Adults and Health informed the Board that a further update report will be brought to the Board in January with details of the implementation plan.

Following an enquiry from the Board, the Chairman welcomed Judy Mace, Head of Joint Children's Commissioning for Barnet CCG and LBB, who explained how data is being shared between health and early intervention settings. The Board heard about the data sharing difficulties encountered, particularly in relation to outreach work for vulnerable adults and children.

Ms Mace emphasised the importance of formalising the process towards data sharing. Chris Munday, Commissioning Director for Children and Young People, informed the Board that the discussion around data sharing will be taken forward outside of the meeting with partners.

Having highlighted the commitment in the Strategy to improve mental health across all age groups from pregnancy to later life, the Chairman introduced the Dementia Manifesto for Barnet, the first such manifesto to be developed by a London Borough. The Board noted Barnet's Dementia Manifesto and Public Health's Annual Report as appendices to the report. The Dementia Manifesto for Barnet has been developed as a result of increasing concerns about the number of people living with dementia in Barnet and across the Country and the devastating effects this can have both on sufferers and their families.

Ms Wakeling explained that the Manifesto has been produced by the Joint Commissioning team and reflects the good progress that has made, particularly in diagnosing dementia and in the development of the pathway. Ms Wakeling mentioned the clear commitment from the CCG to increase diagnosis rates and noted the vision set out in the Dementia Manifesto for the people of Barnet.

The Chairman noted that following approval of the Board, Barnet's Dementia Manifesto will be developed and published as an online tool and that a further implementation plan will be developed with partners and stakeholders.

**RESOLVED:**

- 1. That the Health and Wellbeing Board approves the Joint Health and Wellbeing Strategy (2015-2020, appendix 1) for wider circulation including publication on the websites of partner organisations.**
- 2. That the Health and Wellbeing Board notes that the Finance Planning Sub-Group will develop an implementation plan for the Joint Health and Wellbeing Strategy and this will be presented to the Board in January 2016.**
- 3. That the Health and Wellbeing Board notes the progress made by Public Health during 2014/15 (appendix 4).**
- 4. That the Health and Wellbeing Board approves the Dementia Manifesto for Barnet (appendix 3).**

**7. BARNET CLINICAL COMMISSIONING GROUP PRIMARY CARE STRATEGY PROPOSAL (Agenda Item 7):**

Elizabeth James, Director of Clinical Commissioning, Barnet CCG, joined the meeting and briefed the Committee about the development of the local Barnet CCG Primary Care Strategy. Ms James noted that the Primary Care Strategy will be used to inform future joint and delegated primary care commissioning from NHS England.

Councillor Hart raised the issue of residents encountering difficulties with the processes for making complaints or changing their GP; these processes are often raised by residents as being hard to understand and navigate. Councillor Hart asked for this to be looked as the Strategy develops this will become an important local issue to address when responsibility becomes shared with NHS England.

Following a query from the Board about future consultation with patients and the Local Authority, Ms Shakespeare informed the Board that the proposed actions will be reported to the relevant Overview and Scrutiny committees.

Mr Munday welcomed the proposal to engage with Members outside of the Board and also noted the importance of effective engagement with young people.

Dr Howe also noted the importance for consultation with Council teams as well as Care Homes.

Furthermore, the Board heard that following approval by the Board, consultation will be undertaken with service users, providers, Public Health, the Local Authority, Healthwatch

and other stakeholders which will then be presented at the next meeting of the Health and Wellbeing Board.

**RESOLVED:**

1. **That the Health and Wellbeing Board notes and comments on the process to be adopted to develop the local Barnet Primary Care Strategy.**
2. **That the Health and Wellbeing Board notes that the final Barnet CCG Primary Care Strategy will be brought to the Board in January 2016 for information.**

**8. ADULT SOCIAL CARE COMMISSIONING PRIORITIES (Agenda Item 8):**

The Commissioning Director for Adults and Health, Dawn Wakeling introduced the item which provides an overview of the Adult Social Care Commissioning Priorities and highlights the opportunities and challenges for adult social care.

Ms Wakeling highlighted the challenge faced in respect of an increasing elderly population, a higher demand for services and the resources available. The Board also heard about the importance of closer working between local NHS partners and the Council to achieve the changes required.

The Adults and Health Commissioning Director also briefed the Committee about the increase in the number of referrals to adult and social care via accident and emergency.

Following a query from the Board, Ms Wakeling noted that as part of the Adults Transformation Programme, a work programme has been developed to meet the challenges for the provision of adult social care.

Dr Charlotte Benjamin queried when the consultation around the new mental health enablement model would start. Ms Wakeling stated that consultations had taken place through the Mental Health Partnership Board and with social workers themselves.

Councillor Sachin Rajput, Chairman of the Adults and Safeguarding Committee welcomed the report and noted the scale of the challenges in developing a more sustainable health and social care economy and the need for adequate funding to meet increasing demand as set out in table 1 on page 134 of the agenda.

Ms Shakespeare welcomed the discussion and highlighted the need for partnership working to develop plans towards future sustainability in context of the health and social care economy and in light of lessons learnt from previous years. Ms Shakespeare also highlighted that plans need to be developed over more than one year and that more will be known following the Comprehensive Spending Review.

Following an enquiry from the Board, Ms Wakeling explained that emerging technologies are being explored as part of a consortium of 19 boroughs.

Following discussion and proposals for amendment of recommendation 2,

***That the Health and Wellbeing Board notes the financial context for the provision of Adult Social Services in Barnet and, ~~in line with national guidance, the need for the Better Care Fund to provide funding for the protection of adult social care in~~***

***2016/17. the necessity for negotiations between Barnet CCG and LB of Barnet which take this into account, when determining the arrangements for the Better Care Fund and the protection of adult social care in 2016/17 for agreement by HWBB.***

The Board:

## **RESOLVED**

- 1. That the Health and Wellbeing Board notes the Adult Social Care Commissioning Priorities set out in paragraphs 1.4 and 1.5.**
  - 2. That the Health and Wellbeing Board notes the financial context for the provision of Adult Social Services in Barnet and the necessity for negotiations between Barnet CCG and LB of Barnet which take this into account, when determining the arrangements for the Better Care Fund and the protection of adult social care in 2016/17 for agreement by HWBB.**
  - 3. That the Health and Wellbeing Board notes the need for financial sustainability across the health and social care economy in Barnet and endorses the areas highlighted for future joint work as set out in Appendix A of the report.**
- 9. BARNET CHILD AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS) TRANSFORMATION PLAN (Agenda Item 9):**

The Chairman introduced the Barnet CAMHS Transformation Plan report and noted that the Transformation Plan had been submitted to NHS England on 16 October 2015. It was coming to the HWB Board for formal sign off

Ms Mace was invited to the table and provided the Board with an overview of the Transformation Plan for Child Adolescent Mental Health Services (CAMHS) over the next five year period, in order to improve outcomes for children and young people in the borough. Following the clear national line the document details plans to improve support for children and young people with eating disorders which is a major issue for families in Barnet. The plans also include details on prenatal and crisis care. There is also a national drive to improve national and local data collection. Ms Mace highlighted that the key challenge is turning things around quickly in Quarter 4.

The Commissioning Director for Children and Young People, Chris Munday, noted that the Transformation Plan has been developed to improve both life chances for individuals and reduce the reliance (and cost) on public services later in life.

The Chief Operating Officer (Interim) Barnet CCG, Regina Shakespeare, emphasised the proposed planned spend which includes additional funding from the CCG as set out in table 1 on page 156 of the report.

Following a query from the Board in relation to CAMHS services and budgets, Mr Munday suggested that the Children's Services Priorities and Commissioning Intentions should be brought to a future meeting of the Health and Wellbeing Board. (**Action**)

The Board agreed that a lifespan approach needed to be taken to support residents effectively. The Board also noted that supporting people with mental health problems is important for other service areas such as housing, regeneration and employment.

**RESOLVED**

- 1. That the Board notes and confirms the approval of the Transformation Plan.**
- 2. That the Health and Wellbeing Board notes the ongoing development of the five year plan.**
- 3. That the Board approves the plan for publication on the LBB and CCG websites**

**10. BARNET SAFEGUARDING CHILDREN BOARD AND SAFEGUARDING ADULTS BOARD ANNUAL REPORTS (Agenda Item 10):**

The Chairman welcomed the Barnet Safeguarding Children Board and Safeguarding Adults Board Annual Reports, which had already been reported to the Children, Education, Libraries and Safeguarding Committee as well as the Adults and Safeguarding Committee respectively.

Chris Miller, Independent Chair of BSCB and SAB introduced the item which notes the performance as well as the work to be delivered to address areas of concern. Mr Miller referenced the committed partnership working of both Boards in delivering their priorities.

Ms Wakeling noted the challenge for staff around their understanding of what it means to have 'capacity' to make decisions, an issue that was highlighted by the 'Cheshire West case' which sets out a new threshold for professionals in assessing the concept of liberty and the need to safeguard clients from harm.

Further to the query from Dr Debbie Frost, Mr Miller noted the need for recruiting more independent lay members to join the safeguarding boards.

**RESOLVED**

- 1. That the Health and Wellbeing Board notes and comments on the Annual Reports of the Barnet Safeguarding Children Board (BSCB) and Safeguarding Adults Board (SAB) attached at Appendix 1 and 2.**

**11. HEALTH AND SOCIAL CARE INTEGRATION PROGRESS REPORT INCORPORATING BETTER CARE FUND PERFORMANCE (Agenda Item 11):**

The Chairman welcomed the report on the progress in relation to the Better Care Fund (BCF) targets as well as the delivery of the health and social care integration work which is a key piece of work for the Board.

Ms Wakeling briefed the Board about the dashboard set out on pages 321-322 of the agenda which provides a summary of the performance against each of the BCF metrics. Ms Wakeling drew attention the non-elective admissions (NEL) which relates to the pay for performance element of the BCF. Ms Wakeling requested the Board to note that, as shown by the BCF metrics in the report, the groups impact on performance are outside of

the BCF plans and that these focus on people over 55 with long term conditions and the frail elderly.

The Chairman invited Maria O'Dwyer, Director for Integrated Commissioning, Barnet CCG to join the meeting, Ms O'Dwyer explained that Non-Elective Admissions are the key indicator on which Barnet's success with the BCF is assessed.

**Action:** Ms O'Dwyer to share the BCF paper from a recent Finance, Performance and QUIPP (FPQ) Group with the HWBB

Following a query from the Board, Ms O'Dwyer informed the Board that deeper analysis and clinical work will be undertaken to look at the 0-4 age group for viral infections which will inform the paediatric urgent care work currently being scoped.

The Director for Public Health, Dr Andrew Howe welcomed the analysis work and noted the partnership work required towards prevention measures and early intervention.

The Chairman welcomed the discussion and the Board requested an update on the three key areas which require deeper analysis work (**Action**) :

- Admissions in the 50-59 age group with particular emphasis on chest pain
- Admissions in the over 85 age group linked to falls and fractures from falls
- The 0-4 age group for viral infections which will inform the paediatric urgent care work currently being scoped.

## **RESOLVED**

- 1. That the Health and Wellbeing Board notes and makes comments as appropriate on the progress on current work to integrate health and social care.**
- 2. That the Health and Wellbeing Board notes and makes comments as appropriate on the performance for Quarter 1 2015/16 of the Better Care Fund.**
- 3. That the Health and Wellbeing Board approves the proposed performance report of Quarter 2 2015/2016 Better Care Fund that will be reported to NHS England in the November submission.**
- 4. That the Health and Wellbeing Board notes the minutes of the Health and Social Care Integration Board of 9 September 2015.**

## **12. MINUTES OF THE HEALTH AND WELL-BEING FINANCIAL PLANNING GROUP (Agenda Item 12):**

The Board noted the standing item on the agenda, minutes of the Health and Wellbeing financial planning group meeting of 16 September 2015. It was noted that in September the Group agreed the plan for the transfer of Public Health Commissioning Responsibilities for 0- 19 Healthy Child Programme which novate from NHS England to the Council on the 1<sup>st</sup> October 2015.

## **RESOLVED**

- 1. That the Health and Well-Being Board notes the Minutes of the Financial Planning Sub-Group meeting of 16 September 2015.**

### **13. FORWARD WORK PROGRAMME (Agenda Item 13):**

The Board received the standing item on the agenda and noted the contents and items on the Forward Work Programme for the Health and Wellbeing Board.

## **RESOLVED**

- 1. That the Health and Wellbeing Board notes the Forward Work Programme and proposes any necessary additions and amendments to the forward work programme (see Appendix 1).**
- 2. That Health and Wellbeing Board Members agree to propose updates to the forward work programme before the first day in each calendar month, so that the work programme can be published on the Council's website more efficiently, with the most up to date information available.**
- 3. That the Health and Wellbeing Board agrees to align its work programme with the work programmes of the Council Committees (namely the Adults and Safeguarding Committee, and the Children's, Education, Libraries and Safeguarding Committee), Health Overview and Scrutiny Committee, and Barnet CCG's Board (see Appendix 2).**

### **14. ANY ITEMS THE CHAIRMAN DECIDES ARE URGENT (Agenda Item 14):**

The next meeting of the Health and Wellbeing Board will commence at 10am on 21 January 2016.

The meeting finished at 11.40 am