#### HEALTH AND WELLBEING BOARD

#### MEETING HELD AT THE TOWN HALL, BOOTLE ON WEDNESDAY 19TH FEBRUARY, 2014

PRESENT: Councillor Moncur (in the Chair) Dr. Janet Atherton, Fiona Clark, Robina Critchley, Councillor Cummins, Councillor John Joseph Kelly, Maureen Kelly, Dr. Niall Leonard and Dr.Clive Shaw

#### 48. APOLOGIES FOR ABSENCE

Apologies for absence were received from Colin Pettigrew and Phil Wadeson.

#### 49. MINUTES OF PREVIOUS MEETING

#### RESOLVED:

That the Minutes of the meeting held on 30 October 2013 be confirmed as a correct record.

#### 50. DECLARATIONS OF INTEREST

No declarations of pecuniary interest were made.

#### 51. SEFTON STRATEGY FOR OLDER CITIZENS 2014-2016

The Board considered the draft "Sefton Strategy for Older Citizens 2014-16" (the Strategy) which had been prepared by the Sefton Partnership for Older Citizens (SPOC).

Kevin Thorne, Integrated Commissioning Manager and Roger Pontefract, Chair of SPOC presented the report which indicated that the draft Strategy was considered in detail by the 3 Older Peoples Forums in Sefton during September and October; and was circulated widely for comments to Council Officers, the E-Consult Panel and the Sefton Clinical Commissioning Groups' 'Big Chat" circulation list.

The draft Strategy, attached as an appendix to the report, had a vision of creating a place where older people could live, work and enjoy life as valued members of the community; and detailed the following eight objectives:-

- objective 1 to advocate that the voice of older citizens is reflected in the planning and delivery of services
- objective 2 to reduce the level of loneliness and social isolation experienced by older people in sefton
- objective 3 to encourage the provision of health and wellbeing services for older people which are effective and of high quality

- objective 4 to help older people to achieve financial security
- objective 5 to work with local agencies to provide services which are of high quality, joined-up, and age-proofed
- objective 6 to help older people to feel safe and secure within their communities
- objective 7 to challenge providers to treat vulnerable older citizens with dignity and respect in all care settings
- objective 8 to promote and respond to the impact that the new care Bill will have on older citizens in Sefton

The Strategy concluded that SPOC wanted Sefton to be a place where old age was enjoyed rather than endured; stated that a positive outlook and strong support networks were vital if later life was to be enjoyed to the full; and that the Strategy demonstrated how this could be achieved.

The Board also watched a video produced by SPOC on the Strategy.

#### **RESOLVED:** That

- (1) the "Sefton Strategy for Older Citizens 2014-16" be approved; and
- (2) the Sefton Partnership for Older Citizens be requested to prepare an Action Plan to monitor its implications; and to present regular progress reports to the Programme Group of the Health and Wellbeing Board.

## 52. OLDER PEOPLE'S PILOT - CHURCH WARD

The Board considered the report of the Area Co-ordinator Central Sefton updating on the progress of the Church Ward Older People Pilot (the Pilot).

Councillor Cummins and Alex Spencer, Area Co-ordinator presented the report which indicated that in November 2012, the Cabinet Member - Older People and Health approached officers from the Council in order to develop a pilot which focused on reducing loneliness and social isolation for older people (residents aged 60 and over) living in Church ward; and that in order to support this pilot a meeting was convened with partners working across Church ward at which three discreet work areas were identified, namely:-

- (1) the identification of older people living in Church ward who may either experience loneliness/social isolation, or who may be vulnerable to experiencing loneliness/social isolation;
- (2) the development of an online directory of services, which could signpost or refer identified older people to services which they may not know are available; and

(3) a mapping exercise of community assets to determine what partner assets and "soft" assets e.g. cafes, social clubs, are available in Church ward.

The report also identified the progress to date on the three workstreams by an established Steering Group; and that the Steering Group would continue to work with the Campaign to End Loneliness to determine examples of national best practice that could be applied locally.

**RESOLVED:** That

- (1) the update on the progress of the Church Ward Older People Pilot be noted; and
- (2) further reports on the progress of the Pilot be submitted to future meetings of the Board.

#### 53. UPDATE ON THE WINTERBOURNE REVIEW

The Board considered the report of the Director of Older People that updated on progress with the stocktake undertaken as part of the national Winterbourne View Improvement Programme (WVIP).

The report indicated that the Council had submitted evidence and information as required to WVIP and had used this as an opportunity to understand changes to responsibilities and develop new partnerships following the organisational changes introduced under the Health and Social Care Act 2012; that WVIP had analysed the stocktake return; and Appendix 1b to the report set out the comments taken from Sefton's narrative and summarised to form an outline of key strengths and potential areas for development.

**RESOLVED:** That

- (1) the Winterbourne View Joint Improvement Programme stocktake of progress as detailed in the report and Appendix 1b be noted; and
- (2) a further progress report be submitted to the Board in three months on the most pertinent points actioned.

#### 54. LIFESTYLE AND MENTAL WELLBEING SURVEY

The Board considered the report of the Director of Public Health that advised of the findings of two surveys examining different aspects of health and wellbeing in Sefton in 2012.

The report indicated that the first survey, the Merseyside Lifestyle Survey, was jointly commissioned with NHS Halton and St Helens, NHS Knowsley, and Liverpool Primary Care Trust to explore key health behaviours and attitudes across Merseyside and within specific population groups; whilst the second survey, the Mental Wellbeing Survey, was commissioned

across the North West in response to a growing need to understand more about the mental wellbeing of people in the region.

The Appendix to the report provided the key results of the surveys relating to the following topics, general health, healthy weight, smoking, alcohol, mental wellbeing, place and money.

#### **RESOLVED**:

That it be noted that the two surveys referred to in the report provide a rich source of intelligence that can be used to inform the development of effective population based interventions to improve health and wellbeing and to reduce inequalities.

#### 55. CLINICAL COMMISSIONING GROUPS DELIVERY DASHBOARD - QUARTER 2

The Board received a presentation from Fiona Clark, Chief Officer for the Southport and Formby and the South Sefton Clinical Commissioning Groups (CCGs) on Checkpoint Quarter 2 CCG Delivery Dashboard.

Ms. Clark detailed the five balance scorecard domains of:-

- Are local people getting good quality care?
- Are patient rights under the NHS constitution being promoted?
- Are health outcomes improving for local people?
- Are CCG's delivering services within their financial plans?
- Are conditions of CCG authorisation being addresses and removed (where relevant)?

together with the CCG assurance framework balance scorecard summary showing the red/amber/green domain status; and concluded by updating on the CCG Delivery Dashboard relating to:-

- Support plan from Q1 agreed and being implemented
- Checkpoint 3 with NHS England (Merseyside) Team March 2014
- Further update to Health and Wellbeing Board March 2014

Ms Clark advised that she would bring Q3 performance to the next meeting, to ensure the Board was kept appraised of performance.

#### RESOLVED:

That Fiona Clark be thanked for her informative presentation.

#### 56. COMMISSIONING INTENTIONS AND FORWARD PLANNING -CLINICAL COMMISSIONING GROUPS

The Board received a presentation from Fiona Clark, Chief Officer for the Southport and Formby and the South Sefton Clinical Commissioning

Groups (CCG) on Commissioning Intentions and Forward Planning of the CCG's.

Ms. Clark detailed the strategic planning framework; the NHS Right Care model which had three basic steps: Where to Look; What to Change; and How to Change; the Strategic Plan that had three strategic priorities (frail elderly, unplanned care and primary care transformation) together with the two delivery mechanisms (Virtual Ward Plus and Care Closer to Home Plus and the Better Care Fund); and the programmes attached to the Strategic Plans relating to cardio vascular disease, respiratory, diabetes, cancer, mental health, children, end of life and urgent care (Virtual Ward /Care Closer to Home).

Ms. Clark concluded by detailing the commissioning intentions of the CCG's for 2014/15 as follows:-

South Sefton CCG

- Hospice at home service
- Community Opthalmology- stage 1
- Community Respiratory Service
- New pathway for G.P accepted patients in A&E

Southport and Formby CCG

- Cardiovascular Disease Strategy
- Lymphoedema/Healthy Legs Service
- Gastroscopy Access
- Children Community Nursing
- Section 136

Together with the numerous other schemes under consideration by both CCG's for the period 2014/15 to 2018/19.

**RESOLVED**:

That Fiona Clark be thanked for her informative presentation.

## 57. BETTER CARE FUND PLAN

The Board considered the report of the Deputy Chief Executive that provided background information on the Better Care Fund (BCF) (formerly the Integration Transformation Fund) and outlining the approach being taken in developing Sefton's Better Care Plan. The report also noted that the funding within the BCF was not new money. It was a transfer of money from the NHS to Local Authorities which was already committed to services including substantial Local Authority service provision. The funding was intended to be used to support adult social care services which also had a health benefit

The report indicated that BCF required Councils and Clinical Commissioning Groups (CCGs) to deliver five year local plans for integrating health and social care; that the first stage of the process was that a BCF template had to be submitted by 14 February 2014 to NHS England (North), which would then be assured by that organisation, with support from the Local Government Association, to assess whether Sefton's BCF was sufficiently robust to deliver the governments vision for the integration of health and social care; that whilst BCF did not come into full effect until 2015/16, the intention was for CCGs and local authorities to build momentum during 2014/15, using the £200 million (nationally) due to be transferred to local government from the NHS to support transformation; that plans for use of the pooled budgets must be agreed by CCGs and local authorities, and endorsed by the local Health and Wellbeing Board.

The report also detailed how payment of BCF funds would be linked to performance; and recommended that the following metric from the NHS Outcomes Framework be adopted as the local metric for the Sefton Better Care Plan: Proportion of people feeling supported to manage their (long term) condition.

The report concluded that preparations for the development of a Better Care Plan, as part of the Southport and Formby and South Sefton CCG's 5 year Strategic Plans were underway; that once feedback, both from the assurance process and from continued engagement on the first cut of the Better Care template and the CCG's draft 5 year strategic plans was received, a more detailed revised plan would be submitted to the Health and Wellbeing Board and Cabinet; and that the guidance on the BCF had been changed during the process of development, and that it was anticipated that it would continue to be firmed up over coming months as the assurance process validated whether the BCF templates were robust enough in terms of vision, ambition and schemes, to draw down funding.

Attached as an appendix to the report was the BCF planning template that identified the plan details, the vision and schemes, the national conditions and the risks and mitigating actions to be taken.

#### **RESOLVED: That**

- (1) the first version of the Better Care Plan, as set out in the template attached to the report (and as agreed by the Chair of the Health and Wellbeing Board in consultation with the Cabinet Member - Older People and Health, the Chief Officer of the Southport and Formby and South Sefton CCGs and the respective Chairs of those Boards, and submitted to Government on the 14 February 2014) be approved, subject to confirmation by Cabinet on 27 February 2014; and
- (2) it be noted that there is no new money attached to the Better Care Fund.

# 58. PROGRAMME GROUP MEETINGS - KEY DISCUSSIONS AND DECISIONS

The Board considered the report of the Head of Business Intelligence and Performance that provided a list of key discussions/issues from meetings of the Programme Group since its inaugural meeting on 9 December 2013.

The report reminded the Board that the Programme Group consisted of statutory members of the Board, the Chief Officer of the Clinical Commissioning Groups, the Deputy Chief Executive of the Council and the Chief Executive of Sefton Council for Voluntary Services, with the aim of ensuring the delivery of the Health and Wellbeing Strategy on behalf of the Board, managing the performance of the sub structure's Forums and Task Groups, and providing strategic oversight through reports and managing the Forward Plan and Accountability Framework; that the Programme Group had met on three occasions; and provided details on the following topics that had been considered:-

- Better Care Fund (formerly Integration Transformation Fund)
- Partnerships Development and Relationships
- Policy Updates/Statutory Roles
- Provision of Mental Health and Wellbeing Services

#### RESOLVED:

That the range of issues discussed and actions taken by the Programme Group during its monthly meetings be noted.

#### 59. ROBINA CRITCHLEY

The Chair advised that this would be the last meeting of the Board attended by Robina Critchley, Director of Older People as she was due to shortly retire from Sefton Council.

#### **RESOLVED**:

That the Health and Wellbeing Board places on record its best thanks and appreciation to Robina Critchley for her many years service to Sefton Council and for her efforts in establishing and serving on the Board; and wishes her a long, healthy and happy retirement.