

To: All Members of the Board, all officers named for 'actions'.

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**HEALTH AND WELLBEING BOARD
13 NOVEMBER 2013
M I N U T E S**

ATTENDANCE

MEMBERS OF THE BOARD

County Councillors

T C Heritage, R M Roberts, C Wyatt-Lowe (Chairman)

Non County Councillor Members

T Kostick, N Small, L Watts, N Bell, Clinical Commissioning Groups
J Coles, Director of Children's Safeguarding and Specialist Services
I MacBeath, Director of Health and Community Services
J McManus, Director of Public Health
S Wren, Healthwatch Hertfordshire
D Thornhill, L Needham, District Council Representatives

PART 1

1. MINUTES

1.1 The minutes of the Health and Wellbeing Board meeting held on 18 September 2013 were confirmed as a correct record of the meeting.

2. PUBLIC QUESTIONS

2.1 The question asked and answer given at this meeting is set out in the annex to these minutes.

ACTION

3. EARLY YEARS COMMISSIONING UP TO 5 YEARS

3.1 The Board heard that the expiry of the contracts for Hertfordshire's Children's Centres had coincided with the proposal to transfer public health responsibilities for children under five years, to the local authority. This provided an opportunity to consider the services together and develop a shared vision for future delivery. The report suggested the development of a joined up approach for future commissioning through an integrated project.

3.2 The Board emphasised the importance of the commitment to joined up working that had already been established with CCGs and GPs etc. The use of Children's Navigators was also discussed and this was considered a great opportunity for their use. It was felt that it would be beneficial to consider Early Years at a Board Development event.

Conclusion

The Board agreed:

3.3 That a joined up approach was vital for the future of the services and that closer alignment between Children's Centres and Health Visitor Services should be sought.

3.4 That discussions should be opened with the Local Area Team regarding the submission of a bid for funding to support commissioner and provider development to deliver Health Visitor Service transformation.

4. CHILD AND ADOLESCENT MENTAL HEALTH SERVICES

- 4.1 The Board received a report which introduced Herts Strategy for Young Minds, a multi agency 3 year strategy for the further development of Child and Adolescent Mental Health Services for tiers 1 to 3.
- 4.2 Overarching priorities included improved inter-agency working, earlier intervention through universal services, improved access/pathways into local CAMHS services, improved ASD services and crisis support to manage children and young people more effectively out of A&E services.
- 4.3 During discussion Board Members stressed the need for a very clear strategy setting out what need to be commissioned together with an implementation plan. It was agreed that Tier 4 should also be included in the strategy and suggested that the 'Children Navigator' role would be useful.

Conclusion

- 4.4 The Board endorsed the proposed multi agency 3 year strategy for the further development of Child and Adolescent Mental Health Services, Tiers 1 to 4.

5. THRIVING FAMILIES

- 5.1 The Board was updated on progress achieved through the Thriving Families Programme. The report also identified the costs associated with the support provided to families and the potential savings that might be achieved.
- 5.2 The Board discussed the effects of poverty and worklessness and how these were being tackled. It was felt that the Children Navigator role could also play its part in this area.

Conclusion

- 5.3 The Board noted the report and agreed to maintain its strategic commitment to the approach and continue to support and Champion the Thriving Families Programme at all opportunities.

6. HERTFORDSHIRE 'SEND' PATHFINDER

- 6.1 The Board received a report which provided a summary of Hertfordshire's Pathfinder journey to date and considered potential implications for joint commissioning and integration.

- 6.2 The Board heard that following the implementation of the Children and Families Bill in September 2013, children, young people and their parents/carers would have more choice and control in terms of identifying the support they needed to meet their outcomes and also how it was provided.
- 6.3 During discussion the Board emphasised that the child should be at the centre of the services and that it should be built around them. Members were pleased to see that planning for transition was now happening much earlier.

Conclusion

The Board:

- 6.4 Noted the report and the legal duty of each agency to promote integration between education, health and social care services for children and young people with special educational needs.
- 6.5 Endorsed the proposal to review how this cohort of children and young people were supported across the agencies in Hertfordshire.

7. HERTFORDSHIRE PHARMACEUTICAL NEEDS ASSESSMENT

- 7.1 The Board received a report regarding Hertfordshire's Pharmaceutical Needs Assessment (PNA). Members were informed of the background and legislative framework to the PNA and the current situation regarding it in Hertfordshire. It was noted that it was a statutory duty for Health and Wellbeing Boards to produce their first PNA by 1 April 2015.
- 7.2 The PNA needed to be revised and plans for this updating were included in the report.

Conclusion

- 7.3 The Board noted the report and agreed the suggested process of seeking a contractor to undertake this work.

8. HERTFORDSHIRE SAFEGUARDING ADULTS BOARD ANNUAL REPORT FOR 2012-2013

- 8.1 The Board considered the Hertfordshire Safeguarding Adults Board (HSAB) annual report which summarised its progress against the Safeguarding Business Plan, including the achievements of the individual partner agencies. It also included information on safeguarding activity and trends during 2012-2013.

Conclusion

- 8.2 The Board noted the Hertfordshire Safeguarding Adults Board (HSAB) annual report for 2012-2013.

9. HERTFORDSHIRE SAFEGUARDING CHILDREN ANNUAL REPORT FOR 2012-2013

- 9.1 The Board considered the Hertfordshire Safeguarding Children Board (HSCB) annual report which summarised its progress against its Business Plan and detailed child protection and performance activity.
- 9.2 Members requested and received information on the number of Serious Case Reviews currently taking place.

Conclusion

- 9.3 The Board noted Hertfordshire Safeguarding Children Board (HSCB) annual report for 2012-2013.

10. WINTER PREPAREDNESS – HEALTH AND SOCIAL CARE

- 10.1 The Board received an overview of the winter plans that health and social care partners had put in place across Hertfordshire for 2013/14. These included: actions taken to prepare for winter; winter planning processes and partner working; contingency and escalation assurance; and new schemes and patient benefits.
- 10.2 Members noted that each winter brought with it challenges that affect health and social care service delivery. Challenges such as severe weather, flu, norovirus and festive public holidays placed additional pressures on the public, health and social care system. The Board was assured that each organisation, including Social Care had their own in depth plans in place.

The Board discussed communication with the public and heard that this would begin with 'Self Care Awareness Week' at the end of November. It was suggested that leaflets should also be available electronically on relevant websites.

Conclusion

- 10.3 The Board noted the update and requested that a review of the Winter 2013/14 be presented to a future meeting.

11. BUDGET ALLOCATIONS: HERTFORDSHIRE CLINICAL COMMISSIONING GROUP'S (CCG) 2013/14 ALLOCATIONS

11.1 The Board received a verbal update from representatives of the CCG's. It heard that allocations had now been firmed up. There was concern regarding funding issues and in the future there would be a large gap between available resources and need for provision. The new government Bill had introduced new burdens but there would be no additional funding to pay for these. Members agreed that the key to success would be for all agencies to plan together and make sensible, joint decisions.

Conclusion

11.2 The Board noted the update.

Kathryn Pettit
Chief Legal Officer