

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

From: Legal and Member Services
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**HEALTH AND WELLBEING BOARD
4 JUNE 2015
M I N U T E S**

ATTENDANCE

MEMBERS OF THE BOARD

N Bell, Clinical Commissioning Group Representative
D Law, NHS Provider Representative
M Downing, Healthwatch Hertfordshire
B Flowers (substitute for L Watts), Clinical Commissioning Group Representative
T Heritage, County Councillor
D Lloyd, Hertfordshire Police and Crime Commissioner
I MacBeath, Director of Health and Community Services
J McManus, Director of Public Health
L Needham, District Council Representative
R Roberts, County Councillor
C Wyatt-Lowe, County Councillor (Chairman)

PART 1

1. MINUTES

1.1 The minutes of the Health and Wellbeing Board meeting held on 5 March 2015 were confirmed as a correct record of the meeting.

2. PUBLIC QUESTIONS

2.1 There were no public questions.

ACTION

3. EAST AND NORTH HERTFORDSHIRE INTEGRATED CARE PROGRAMME UPDATE

- 3.1 The Board received a briefing on the development and progression of the East and North Hertfordshire Integrating Care Programme. The Programme embraced the principles defined in the strategic shift to prevention which was endorsed by the Board in 2014, as well as the strategic priority relating to integration.
- 3.2 The Board heard from Tom Cahill who was Chairman of the East and North Hertfordshire Integrated Care Programme Board, who detailed the principles and commitments which were seen to be key enablers for success.
- 3.3 Members acknowledged that the idea of integration had initially been discussed in 2003 but the essential partnership working and collaboration was now becoming apparent.

Conclusion

- 3.4 The Board endorsed the direction of travel and the 'Integrating Care Principles and Commitments' as detailed in the report.

4. HERTS VALLEY INTEGRATED CARE PROGRAMME UPDATE

- 4.1 The Board received a briefing on the development and progress of Herts Valley's Integrated Care Programme. The priority to date had been 'integrating care in the community' and the key driver had been the Living well Programme which focused on older people, over 65 years of age with complex needs, in the Watford area.
- 4.2 The Board heard from David Law who was Chairman of the Herts Valley Integrated Care Programme Board, who outlined expected outcomes for service users and carers, the objectives of the programme and progress to date.

Conclusion

- 4.3 The Board endorsed the direction of travel as detailed in the report.

5. HERTFORDSHIRE EARLY CHILDHOOD STRATEGY

- 5.1 The Board received a report which sought approval for the Early Childhood Strategy and outlined progress to date.
- 5.2 Members heard that the Strategy had been developed following a multi-agency workshop and discussions with service leads. The Strategy identified four early childhood pledges for achieving integrated working and the learning from three pilot projects which had

been undertaken.

- 5.3 During discussion, it was highlighted that focus must be placed on both process and health outcomes for young people and the 'prevention' must be explicit throughout the Strategy. It was acknowledged that work needed to continue to move forward with regard to the relationship between GP practices and children's centres.

Conclusion

- 5.4 The Board approved the Early Childhood Strategy.

6. INTEGRATED COMMISSIONING FRAMEWORK: CHILDREN, YOUNG PEOPLE AND FAMILIES INTEGRATED COMMISSIONING PRIORITIES 2015/16

- 6.1 The Board was presented with a paper detailing the Children, Young People and Families Integrated Commissioning Priorities for 2015/16.

- 6.2 Members heard that the priorities had been developed jointly with East and North Herts CCG and Herts Valley CCG, the County Council, including Children's Services and Public Health. There were three priority areas:

Early Childhood;
0-25 Integration for Children and Young People with Additional Needs; and
Whole System Review of Children and Adolescent

- 6.3 The work was intended to inform the development of a whole-system, best practice model for Hertfordshire and an overarching Integrated Commissioning Strategy to inform future needs, options, decision and strategies for partners responsible for commissioning and delivering children and family services.

- 6.4 During discussion, Members requested that the document should be strengthened to make it clear that this was a whole system approach.

Marion Ingram

Conclusion

- 6.5 The Board agreed the Integrated Commissioning Priorities 2015/16 and that the final version be circulated to stakeholders.

7. CHILD AND ADOLESCENT MENTAL HEALTH SERVICE (CAMHS) REVIEW AND TRANSFORMATION

- 7.1 The Board received a paper detailing the outcomes of the review of CAMHS in Hertfordshire.

- 7.2 The review had been established by the four commissioners (two CCGs, Children's Services and Public Health) due to the lack of cohesion in the delivery of the service. The review team had received input from over 500 young people, carers, teachers, clinicians, parents and other professionals.
- 7.3 Members were informed that the review proposed a redesign of the system including new governance arrangements and received details of the model for a Transformation Plan for Hertfordshire.
- 7.4 Members stressed that mental health and resilience in young people needed to be improved and the assumption that the numbers of young people with mental health problems would increase should not be accepted. Prevention needed to be promoted and it was noted that the Board was sponsoring a 'Year of Mental Health' from July 2015 which would be focusing on raising the profile, de-stigmatising, improving access, helping and supporting.

Conclusion

- 7.5 The Board noted the update and endorsed the direction of travel agreed by the Commissioners.

8. VOLUNTARY SECTOR COMMISSIONING STRATEGY

- 8.1 The Board received a report which sought its approval of the final draft of the Voluntary Sector Commissioning Strategy which had been widely consulted upon across the voluntary, community and statutory sectors in Hertfordshire.
- 8.2 The Strategy outlined a set of characteristics, values and behaviours expected from the voluntary and community sector, that were shared with the statutory sector, and captured a vision of how they would work together in the future.

Conclusion

- 8.3 The Board agreed the Voluntary Sector Commissioning Strategy and encouraged all Hertfordshire health and wellbeing partners to sign up to the approach.

9. COMMITMENT TO INCREASE HIV TESTING

- 9.1 The Board received a report informing it of recommendation made by the Public Health and Localism Cabinet Panel to Cabinet, regarding increasing HIV testing to ensure consistency with the national 'Halve It' campaign.

Conclusion

- 9.2 The Board supported the approach to increasing HIV testing in
June 2015

Hertfordshire.

10. AIR QUALITY STRATEGIC PLAN

10.1 The Board received a report informing it of the association between air pollution and premature deaths in Hertfordshire.

10.2 Members were informed of the county-wide approach to enhance the air quality work of districts and boroughs, with the aim of reducing harm from air pollution. Specifically, the three strategic priorities were to reduce the harm from air pollution:

Knowledge;
Prevention; and
Harm reduction

Conclusion

10.3 The Board approved the partnership approach and the recommended actions for delivering the three strategic priorities.

11. OPERATIONALISATION OF THE BETTER CARE FUND

11.1 The Board received a report presenting the national and local accountability arrangements for the Better Care Fund monies and outlined the NHS England guidance and recommendations on the role of the Health and Wellbeing Board in the financial oversight and performance monitoring of integrated services.

Conclusion

11.2 The Board noted governance structure and responsibilities outlined NHS England and agreed that the Board would:

- (i) Receive a six-monthly and annual report using the monitoring template issued by NHS England; and
- (ii) Sign off the quarterly and annual returns prior to submission to NHS England. Should meeting dates not coincide with submission dates, the returns would be approved by the Board Chairman, the CCG Accountable Officers and the Director of Health and Community Services.

ANY OTHER URGENT BUSINESS

12. HEATWAVE PLANNING

12.1 The Chairman agreed to take this matter as an urgent item of business due to the fact that the 'Heat Wave Plan for England' had just been published and urgent action needed to be taken to prepare a multi-agency localised plan for Hertfordshire.

Conclusion

- 12.2 The Board requested the Director of Public Health prepare a localised Health Wave Plan for Hertfordshire for 2015.

Kathryn Pettit
Chief Legal Officer