

Minutes



To: All Members of the Health & Wellbeing Board

From: Legal, Democratic & Statutory Services
Ask for: Michelle Diprose
Ext: 25566

HEALTH AND WELLBEING BOARD 15 DECEMBER 2015 MINUTES

ATTENDANCE

MEMBERS OF THE PANEL

N Bell, B Flowers, N Small, Clinical Commissioning Group Representatives
J Coles, Director of Children's Safeguarding and Specialist Services
J McManus, Director of Public Health
M Downing, Healthwatch Hertfordshire
T Heritage, County Councillor
D Lloyd, Hertfordshire Police and Crime Commissioner
L Haysey, L Needham, District Council Representatives
N Carver, David Law, NHS Provider Representatives
R Roberts, County Councillor
C Wyatt-Lowe, County Councillor (Chairman)

CHAIRMAN'S ANNOUNCEMENTS

The Chairman congratulated Beverley Flowers on her appointment as Chief Executive for East and North Herts Clinical Commissioning Group.

PART I ('OPEN') BUSINESS

1. MINUTES

- 1.1 The minutes of the Health and Wellbeing Board meeting held on 9 October 2015 were confirmed as a correct record of the meeting.

2. PUBLIC QUESTIONS

- 2.1 There were no public questions.

ACTION

3. ANNUAL SAFEGUARDING ADULTS REPORT

[Officer Contact: Elizabeth Hanlon]

3.1 The Board received a report in relation to the work of the Hertfordshire Safeguarding Adults Board (HSAB) and Partnership 2014-15

3.2 Members noted that the role of the HSAB was to:

- maintain and develop inter-agency frameworks to safeguard adults in Hertfordshire
- scrutinise the outcomes of Safeguarding Adult Reviews and key performance data to ensure effective delivery of safeguarding practices in Hertfordshire
- challenge current safeguarding practices in Hertfordshire
- seek assurance that the safeguarding practice delivered by all the key organisations was maintained at highest level
- agree and oversee a strategic plan and publish an annual report

3.3 Members were informed of the new structure and new subgroups that sat within the framework of the HSAB. It was noted that the board met every 2 months and work with the subgroups policies were currently being updated. The HSAB policy had been written and would be published in the New Year.

3.4 The Board was pleased to note that the HSAB was working closely with the Hertfordshire Safeguarding Children's Board to ensure links from childhood to adulthood were in place.

3.5 The Board made some suggestions to be included in the Business Plan, these were:

- improvements to survey's
- domestic Homicide review to be linked to HSAB review
- domestic abuse trends over the years to be included pack

The current Business Plan can be found [here](#)

Conclusion:

3.6 The Board noted the progress of the Annual Safeguarding Report and made suggestions as listed in 3.5 above, for inclusion in the HSAB Business Plan over the next twelve months.

Elizabeth Hanlon to action

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4. HERTFORDSHIRE PHARMACEUTICAL NEEDS ASSESSMENT

[Officer Contact: Lisa Olins, Pharmacy Consultant, Public Health Team (01438) 843135]

- 4.1 The Board received a report in relation to the current position of the Pharmaceutical Needs Assessment (PNA). The report described the background and the NHS regulations concerning the PNA.
- 4.2 Members were informed that the current PNA was produced in April 2015 and there was a legislative basis for the Health and Wellbeing Board to produce a revised publication by 1 April 2018. The document was a framework for commissioning pharmacy services in defined areas. The Board was informed that the PNA was designed to be progressive document.
- 4.3 Members were informed of the timescales for the tendering process and estimated cost for the production of the PNA
- 4.4 The Board was pleased to note the development of the Pharmaceutical Needs Assessment. The Board hoped that all statutory partners such as the NHS and the Clinical Commissioning Groups would contribute to the specification of the PNA to ensure that what was included into the assessment, also worked for all partners.

Conclusion:

- 4.5 The Board noted the content of the report and agreed the process to seek a contractor to undertake this work.

Joel Bonnet /
Lisa Olins
to action

5. HERTFORDSHIRE COMPACT

[Officer Contact: Ruth Harrington, Head of Community Wellbeing (01438) 845843]

- 5.1 The Board received a report detailing the work carried out to refresh the Hertfordshire COMPACT which was a voluntary agreement between statutory organisations and the voluntary sector in a geographical location.
- 5.2 It was noted the COMPACT was last updated in 2005 and work to refresh it in 2015 had been undertaken by a working group which included representatives from Clinical Commissioning Groups; Police & Crime Commissioner and other service areas throughout the County Council. The draft COMPACT for wider consultation was attached as Appendix A to the report. It was proposed that once responses had been received, the final version of the

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COMPACT would be published early 2016.

- 5.3 The Board acknowledged officers for the good work carried out on the COMPACT and it was hoped it was a piece of work that could be turned into a shared common cycle. Member agreed that they would discuss the COMPACT further at a future development day of the board.

Conclusion:

- 5.4 The Board noted the work carried out to refresh the Hertfordshire COMPACT, attached as Appendix A to the report, and noted the consultation process for the draft Hertfordshire COMPACT.

Ruth
Harrington to
note / action

6. BETTER CARE FUND UPDATE

- 6.1 The Board received a presentation by Jamie Sutterby, Assistant Director, Health Integration, which provided an update on 'Better Care Fund (BCF) in Hertfordshire', along with an update of progress against the national conditions and performance metrics.

- 6.2 The presentation gave the board information on:

- key performance indicators
- integrated care services in Hertfordshire
- the national programme for the Better Care Fund
- transformational projects
- monitoring of the BCF performance and performance indicators
- BCF and the comprehensive spending review

- 6.3 The Board noted that the number of people being admitted to hospital had increased, although this was not always due to emergency admission but to the number of people that were ill and being referred by GP's. Members also noted that in some circumstances ambulances were called as an emergency, where if there had been health intervention available, i.e. to administer antibiotic, the person possibly could of stayed at home, preventing a stay in hospital which added more pressure to the health system.

- 6.4 It was noted that the Board needed to work with other partners to understand how the BCF could help achieve better processes to manage people through the health care system more efficiently.

Conclusion:

- 6.5 The Board noted the presentation.

Jamie Sutterby
to note / action

7. STRATEGY REFRESH AND PERFORMANCE INDICATORS UPDATE

7.1 The Board received a presentation in relation to the process for updating the Hertfordshire Health and Wellbeing Board Strategy, which included the consultation and engagement process with stakeholders across the County.

7.2 The presentation gave an update on progress since October 2015 of the six draft priorities', which included:

- The bigger picture (Health Profile Summary 2015)
- Starting well (0-5)
- Developing well (5-25)
- Living well (25-65)
- Ageing well (65yrs plus)
- Communication and wider engagement

7.3 Members thanked officers for the good work that had been carried out to the update of the Health and Wellbeing Board Strategy and noted that a further update would be presented to the next HWB meeting in February 2016

Conclusion:

7.4 The Board noted the presentation.

8. CHILD AND ADOLESCENT DRUG AND ALCOHOL SERVICES REVIEW

[Officer Contact: Jim McManus, Director Public Health (01992) 556884]

8.1 The Board received a report and presentation in relation to the Review of Child and Adolescent Drug and Alcohol Services in Hertfordshire. It was noted that the County Council had commissioned 'TONIC' to review existing drug and alcohol services, including that of the role played by specialist and universal services for young people and families.

8.2 'TONIC' engaged with service users; young people; parent's commissioners; providers and partner agencies to find evidence of what worked. 'TONIC' recommended changes to the service model and the commissioning and governance of young person's drug and alcohol services; these were as detailed in the report.

Jackie Bunce
to action

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- 8.3 Members were informed that the funding for the proposal was from re-focussing the current 'Young Persons Substance Misuse' funding which was funded by Public Health, Children's Services, Youth Justice and the Police and Crime Commissioner.
- 8.4 The Board heard that the key elements of the proposed model were, Universal Prevention; Building Resilience and Life skills; Nurturing Wellbeing; Empowering Parents; Interventions, Treatment and Targeted Prevention; Enforcement & Availability and Governance.
- 8.5 The business case for change was about moving from commissioning and re-aligning the budget. This would result in a potential saving of £5.3m.
- 8.6 The Board acknowledged the work of officers and 'TONIC' into the Child and Adolescent Drug and Alcohol Services Review, and noted the opportunities for the continued work with the CAMHS Transformation Board Plans.

Conclusion:

- 8.7 The Board:
 - a. Noted the report and endorsed the direction of travel agreed by the Steering Group.
 - b. Acknowledged the significant input of stakeholders to the review.

Jim McManus
to note /action

9. MONEY ADVICE UNIT'S MENTAL HEALTH PROJECT

[Officer Contact: Gary Vaux, Head of Money Advice Unit (01438) 843456]

- 9.1 The Board received a report in relation to the Money Advice Unit's (MAU) contribution to the Year of Mental Health and the progress of the Mental Health Project established in May 2014.
- 9.2 Members heard of a community based team of money advisors, supporting individuals with mental health problems who also experienced debt problems. The team assisted individual in applying for the relevant benefits for increased incomes which improved their mental health and well-being. The key aim was to reduce the demand on NHS costs by reducing demand for clinical; GP and consultant interventions; medication; hospital admissions and specialist staff time.
- 9.3 Members were informed that although the amount of funding that was transferred from the Department of Work and Pension to

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Hertfordshire County Council was being reduced, it was noted that due to the success achieved by the project, it would be subject to a further three years' service level agreement with Health and Community Services Commissioning to continue its support to the Crisis Intervention Service until March 2019.

9.4 The Board welcomed the project and the work which had been carried out with the mental health intervention project, and agreed that it was a good example of how all partners worked well together. However, the Board highlighted the fact that further planning needed to take place for the continuation of the support to Crisis Mental Health Service post 2019.

9.5 **Conclusion**

The Board noted the Mental Health Project and the contribution it made to mental health well-being.

Gary Vaux to
note / action

10. TRANSFORMING CARE FAST TRACK PROGRAMME

[Officer Contact: Katrina Anderson, Assistant Director, East & North Herts Commissioning Care Group]

10.1 The Board received a report outlining the emerging strategic direction of the Learning Disabilities Transforming Care Programme in Hertfordshire and a briefing on the Hertfordshire's position as a Fast Track Pilot site.

10.2 Members heard that the Fast Track Areas brought together organisations across health and social care with a collective access to £10 million transformation fund and technical support to accelerate service re-design and improvement.

10.3 The Board noted that there would be significant re-shaping to services for people with learning difficulties and autism. The service model for Hertfordshire was a multi-agency integrated approach with shared leadership between Hertfordshire County Council, the Clinical Commissioning Groups and Hertfordshire Partnership Foundation Trust.

10.4 Members were informed that a number of agreed crisis intervention/prevention pilots would be commissioned in 2015/16. These were:

- A crash pad pilot – short term accommodation for situations where there had been a placement breakdown or termination of tenancy.

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- A circles project pilot to deliver community support to people with a learning disability who are deemed to be at high risk of sexual offending
- A crisis 'super' team to support and manage people in their own home for an agreed time, rather than admission to hospital
- A creative rehab project

Members noted that additional funding was allocated to support the workforce development and training.

10.5 Officers agreed that they needed to engage further with local authorities and housing associations in order to assist young people being assessed and to be able to obtain housing arrangements quicker. The Board were informed that ultimately the vision was to be a whole age pathway, but it was noted there was work still to do to engage Children's Services and Education.

Conclusion

10.6 The Board discussed the progress that had been made in relation to the Fast Track Pilot site and supported the overall concept underpinning the model ahead of the pilot being initiated.

Katrina Anderson to note / action

11. ANY OTHER URGENT BUSINESS

There was no urgent business.

**KATHRYN PETTITT
CHIEF LEGAL OFFICER**

CHAIRMAN _____

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