

Minutes



To: All Members of the Health & Wellbeing Board

From: Legal, Democratic & Statutory Services
Ask for: Stephanie Tarrant
Ext: 25481

HEALTH AND WELLBEING BOARD

17 OCTOBER 2017

MINUTES

ATTENDANCE

MEMBERS OF THE BOARD

J Coles, Director of Children's Services
B Flowers, K Magson, N Small, Clinical Commissioning Group Representatives
L Haysey, District Council Representative
T Heritage, County Councillor
D Lloyd, Hertfordshire Police and Crime Commissioner
I MacBeath, Director of Adult Care Services
J McManus, Director of Public Health
L Needham, District Council Representative
R Roberts, County Councillor
C Wyatt-Lowe, County Councillor (Chairman)

PART I ('OPEN') BUSINESS

| | ACTION |
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| In the absence of the Chairman, the meeting commenced with the Vice Chair. | |
| 1. MINUTES | |
| 1.1 The minutes of the Health and Wellbeing Board meeting held on 14 June 2017 were confirmed as a correct record of the meeting. | |
| 2. PUBLIC QUESTIONS | |
| 2.1 There were no public questions. | |
| 3i. HERTFORDSHIRE SAFEGUARDING CHILDREN BOARD ANNUAL REPORT 2016-2017 [Officer Contact: Nicky Pace, Independent Chair of HSCB and Caroline Aitken, Safeguarding Boards Manager and Mary Moroney HSCB Business Manager, Tel: 01992 556988] | |
| 3.1 The Board reviewed Hertfordshire's Safeguarding Children Board | |

Annual Report, which reviewed the effectiveness of safeguarding children in Hertfordshire and ensured that outcomes for children were improved with partnership working. Recognition was recorded for all agencies that were working in partnership across Hertfordshire.

- 3.2 The Board noted the priorities for the coming year, with particular areas being targeted e.g. gangs coming into Hertfordshire from London. The future business plan was detailed in the report and aimed to address issues in order keep children in Hertfordshire safe.
- 3.3 Members heard that considerable changes were due to take place for the Children's Safeguarding Board as part of the Children and Social Work Bill. It was noted that the new legislation had put the responsibility on the Local Authority and Clinical Commissioning Groups to monitor safeguarding. A formal meeting was due to take place in November 2017 to discuss future partnership arrangements with a plan due to be submitted by March/April 2018. It was noted that this was a good time to review procedures and increase links with the Adults Safeguarding Board.
- 3.4 Members of the Board noted that it would be useful to have data sets presented graphically, so that headline figures could be easily reviewed. It was noted that this could be included as an appendix to future reports.
- 3.5 The Board discussed the challenges with the change in demography and the resources available going forward and noted that the concerns over coming years may be in relation to under lying issues, such as mental health or drug and alcohol issues. It was noted that year on year, there had been fewer serious referrals and fewer children on a child protection plans and therefore the service was moving in the right direction.
- 3.6 During discussion it was noted that children with special educational needs (SEN) needed to be considered in future plans and that funding should be used to support children and their families.
- 3.7 Whilst a more joint approach was supported it was noted that a single arrangement for both children and adults would not be supported. It was acknowledged that there were a number of priorities cut across both children and adults and that there was a lot of scope to work more in partnership.
- 3.8 Members commented on the reporting of domestic abuse and the need to continue to report on it for those aged 16-18. It was noted that domestic abuse figures for children aged 16+ were recorded and could be provided if required.
- 3.9 It was noted that on page 41 of the report the figures for the total recorded allegations listed was the same for 2014/15 and 2015/16

Nicky Pace,
HSCB
Independent
Chair

Nicky Pace,
HSCB

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and it was noted that these figures would be checked for accuracy.

3ii. HERTFORDSHIRE SAFEGUARDING ADULT BOARD ANNUAL REPORT 2016-2017

[Officer Contact: Liz Hanlon, Independent Chair of HSAB, Caroline Aitken, Safeguarding Boards Manager and Loraine Waterworth HSAB Business Manager, Tel: 01992 556988]

- 3.1 The Board received a copy of Hertfordshire's Safeguarding Adult Board Annual Report, which was presented to the Panel as part of the sign off process before being placed on the County Council's website. The report considered whether the arrangements and practices locally were user focussed and that agencies were working collaboratively to ensure continuous improvements for adults in Hertfordshire.
- 3.2 Members noted the significant developments for the service as detailed on page 5 of the annual report.
- 3.3 It was noted that a newly appointed Quality Management Practitioner was working to obtain feedback from service users, with 98% of respondents being satisfied with their outcomes. Data was being reviewed to assist with the business plan for the 2018/2019.
- 3.4 The Board commented that the report was encouraging compared to the previous years, especially in terms of recognition of domestic abuse.
- 3.5 The Board discussed the under reporting of modern slavery and it was noted that this was an area that was difficult to uncover, however with a multiagency approach modern slavery was being addressed. It was noted that Hertfordshire Police were recognised as directing a good amount of resources to modern slavery.
- 3.6 It was noted that whilst drug related deaths were not included in the report, they were subject to a scrutiny process and report to and dealt with by the drugs and alcohol board. Members noted that the prevention strategy for suicide needed to encompass both adults and children.
- 3.7 Members discussed that the overall % increase in the number of referrals that were converted to enquiry stage was consistent and sought assurance that the increase was reflective of better reporting opposed to an increase in safeguarding issues. It was noted that these figures were monitored on a quarterly basis and that the service were comfortable with the increase reported.

Conclusion:

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- 3.8 • The Health and Wellbeing Board discussed and noted the HSAB Annual Report, and will take it into account in future discussions on safeguarding adults in Hertfordshire.
- 3.9 • The HSAB welcomed feedback, as detailed above, that could inform business planning or the content of next year's Annual Report.

The Chairman had joined the meeting and chaired the remaining items on the agenda.

4. HERTFORDSHIRE HEALTH & WELLBEING STRATEGY DASHBOARD UPDATE

[Officer Contact: Jamie Sutterby, Assistant Director - Integrated Health and Edward Knowles, Assistant Director - Integrated Health
Tel: 01992 588950]

- 4.1 Members received a report and presentation which provided a dashboard update on the Health and Wellbeing Strategy. The presentation can be viewed here: [Health and Wellbeing Strategy dashboard presentation](#)
- 4.2 The Board noted that the dashboard showed the County Council's changes from baseline and previous reports, along with how it ranked against statistical neighbours. Members noted that the update was a mixed picture and discussed the indicators reported on.
- 4.3 It was acknowledged that the % take up of free early education entitlement was likely to improve a child's GCSE grades by one grade, yet Hertfordshire struggled with the % take up. The Board heard that research had found that very affluent residents were using private school and nannies and those less affluent were choosing not to take up offer, in addition to those with complex medical needs who found it difficult to access a provision. It was noted that areas were being visited to promote the impact of early education.
- 4.4 The Board noted that the indicator for overweight and obesity in children aged 4-5 and noted that the statistical area covered changed from year to year and was therefore harder to measure. It was noted that there had been a focus on improving their health of young children and that local authorities were working alongside the clinical commissioning groups.
- 4.5 The Board discussed the worsening position of participation in sports amongst adults. It was noted that with all the investment from Sports England this figure should be improving.
- 4.6 Members noted that none of the indicators had targets shown and it was agreed that these could be introduced if required.

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- 4.7 The Board noted that it would be useful to have a Development Day session to discuss the requirements of the dashboard, in order to ensure the aims of the Health and Wellbeing Strategy were being met and address where more focus was required.

Conclusion:

- 4.8 The Health and Wellbeing Board:

- i) noted the contents of the report.
- ii) Considered the implications of the statistical changes described.

5. UPDATE FROM HERTFORDSHIRE AND WEST ESSEX SUSTAINABILITY AND TRANSFORMATION PARTNERSHIP
[Officer Contact: Peter Cutler, Programme Director, Hertfordshire and West Essex STP]

- 5.1 The Board received a report which gave an update on the Hertfordshire and West Essex Sustainability and Transformation Partnership.
- 5.2 It was noted that in July 2017 a national STP performance dashboard was published for the first time and the Hertfordshire and West Essex STP was rated as 'making progress'.
- 5.3 Members heard that areas that needed improving were around hospital improvement, with two hospitals still in special measures. It was noted that accident and emergency waiting time performance, 62 day waits for cancer patients and financial control were areas where targets were not being met. It was noted that the work plan was moving forward to deliver on performance and quality.
- 5.4 The board discussed the development of Accountable Care Systems and the need to address the options available for Hertfordshire going forward.
- 5.5 Members commented on the work streams and noted that other one line on CAHMS there was not anything in the report on children or prevention and it was noted that the report only detailed updates and that there was a prevention work stream and a mental health and children work stream with work ongoing being undertaken.

Conclusion:

- 5.6 The Board noted the progress made and continue to support improvements.

6. BETTER CARE FUND PLAN 2017-19

[Officer Contact: Edward Knowles, AD Integrated Health, Tel: 01992 588950]

- 6.1 The Board reviewed a report which provided an overview on the Better Care Fund Plan 2017-19. Members noted that at the June 2017, guidance was still outstanding from NHS England. It was advised that the guidance had been received and the plan was submitted to NHS England on their deadline of 11 September 2017 on the understanding that the plan would be approved by the Health and Wellbeing Board at its October 2017 meeting.
- 6.2 The Board discussed the focus of the plan and noted the priorities for the next two years as detailed at 3.3 of the report.
- 6.3 Members commented that it was welcoming to see the transition from childhood to adulthood included in the plan and noted that healthcare needed to be considered across a whole life course.
- 6.4 The Board discussed early identification and the need for greater sharing across organisations and more engagement with the voluntary sector in order to fulfil the plan.
- 6.5 The Board heard that there had been a query to NHS England over the ambitious mandated delayed transfer of care (DToC) figures. This had led to the Council being one of 18 in national escalation for the delay in completing the plan. It was advised that the plan was submitted with the figures set by NHS England with an explanation awaited and confirmation that the Council was not in national escalation.
- 6.6 Member’s discussed the importance of continuing work on preventing the need to use health services and reducing variations in primary. It was agreed that this would be discussed further at the next development day to keep a focus on what the plan was aiming to achieve.

Wendy Tooke,
Health and Wellbeing Board Manager

Conclusion

- 6.7 The Board noted the report and gave their approval for the Better Care Fund Plan 2017-19.

7. SECTOR LED IMPROVEMENT – PEER CHALLENGE ON PREVENTION AND PUBLIC HEALTH

[Officer Contact: Jim McManus, Director of Public Health, Tel: 01992 556884]

- 7.1 The Board welcomed Cllr Sue Woolley, Chair of the Lincolnshire Health and Wellbeing Board, to the meeting. Cllr Sue Woolley provided the Board with an overview on the Sector Led Improvement

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Peer Challenge on Prevention and Public Health.

- 7.2 The Board heard that around sixty interviews were due to take to determine if the Local Authority was moving in the right direction for Hertfordshire. It was advised that all interviews would be conducted under Chatham House Rule so that the message could be fed back anonymously.
- 7.3 Members discussed that they felt that the board was made up of the right membership and noted that changes had been reflected to the make-up of the board as required. It was noted that pharmacy and volunteer representatives would be useful contributors, as well as the NHS England representative attending.
- 7.4 Members of the Board were asked to think about how the Board fed into the Sustainability and Transformation Plan and the Health and Wellbeing Strategy prior to interview. Members not due to be interviewed were advised that they could arrange an interview via the Public Health team.

Conclusions

- 7.5 The board noted the report and endorsed the Peer Challenge.
- 7.6 The board will receive a further report in December 2017 on the outcomes of the Peer Challenge.

8. HERTS VALLEYS CLINICAL COMMISSIONING GROUP FINANCIAL TURNAROUND

[Officer Contact: Stephanie Tarrant, Democratic Services Officer, Tel: 01992 555481]

- 8.1 The Board received a presentation from Kathryn Magson, HVCCG Chief Executive, which provided an update on Herts Valleys Clinical Commissioning Group Financial Turnaround. It was noted that an update would be provided on a quarterly basis. The presentation can be viewed here: [Herts Valleys CCG Presentation](#)
- 8.2 Members heard that whilst Herts Valleys Clinical Commissioning Group (CCG) was still in a difficult place, they were making progress with their savings. It was advised that whilst the CCG was not actually in deficit, it had an underlying deficit which meant the money would eventually run out.
- 8.3 It was advised that the CCG were planning on making savings of £38 million this year, with a further £30 million to be saved next year.
- 8.4 The Board noted the 'Let's Talk' public consultation process and acknowledged that there was public support from the 2500 responses received on most of the proposals, other than for IVF treatment. It

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was noted that that 'Let's Talk 2' public consultation would look deeper in to health services. It was acknowledged that the issues arising from withdrawing treatments/medications would still be a problem despite some buy-in from respondents during the consultation process. Members were advised that the changes would not affect those who were socially and economically disadvantaged more than others, as services were not means tested. It was noted that prevention activity e.g. Sports England bids, would be focussed in these areas in order to achieve maximum benefits. Members commented on the reduction in funding for prevention services and discussed a more joint up approach in order to make savings and share the benefits.

- 8.5 Members of the Board were advised that the CCG's budget setting had been completed and subject to an external review. Members heard that the CCG were comfortable that the budget plan was deliverable and transformational. It was noted that monitoring of services would continue, with people encouraged to make lifestyle changes and given the confidence to succeed.

Conclusion

- 8.6 That the Health and Wellbeing Board note the status update.

9. ANY OTHER URGENT PART I BUSINESS

- 9.1 There was no other urgent Part I business.

**KATHRYN PETTITT
CHIEF LEGAL OFFICER**

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