



Minutes of the meeting of the HEALTH AND WELLBEING BOARD held on THURSDAY, 25 JUNE 2015 at 6.30 pm

Present: Councillor Marland (Chair)
Councillors Bald, and Crooks, M Bracey (Corporate Director People), H Kirkwood (Chair, Healthwatch), S Joyner (Strategic Director [Adult Social Care and Health Partner]), Councillors Long, I McCall, Morla (substitute for Councillor Bramall) and O'Neill, J Palmer (Voluntary Community and Social Enterprise representative), L Payne (Divisional Director [MK Community Health Services/Central North West London NHS Foundation Trust]), M Scott (Director Public Health), Dr N Smith (Chair, MK Clinical Commissioning Board) and M Webb (Acting Chief Officer, MK Clinical Commissioning Group)

Officers: S Gerrard (Interim Service Director [Legal and Democratic Services]), A Green (Project Support), M Hancock (Assistant Director [Joint Commissioning]) and S Heap (Committee Services and Scrutiny Manager).

Apologies: Councillor Bramall, D Cox (Locality Director [South] Central Midlands [NHS England]) and L Knight (Director of Patient Care/Chief Nurse)

Also Present: Councillor Miles and 5 Members of the public

HWB01 APPOINTMENT OF VICE-CHAIR

RESOLVED –

That Dr N Smith (Chair, MK Clinical Commissioning Board) be appointed Vice-Chair of the Health and Wellbeing Board for the year 2015/16.

HWB02 MINUTES AND ACTIONS ARISING

The Board considered the minutes from its meeting on 26 March 2015, together with an update on actions since that meeting.

Mr M Webb (Acting Chief Officer, MK Clinical Commissioning Group) reported that four GP Practices had received funding from the Primary Care Infrastructure Fund.

RESOLVED –

1. That the Minutes of the meeting of the Health and Wellbeing Board held on 26 March 2015 be approved and signed by the Chair as a correct record.
2. That the updates on the actions arising from the previous meeting held on 26 March 2015, including the oral update from Mr M Webb (Chief Officer [Acting] Clinical Commissioning Group) in relation to Item 6 regarding the

Government's announcement of funding investment for Primary Care, be noted.

HWB03

DRAFT JOINT HEALTH AND WELLBEING STRATEGY

Further to Minute HWB47 of the Board's meeting on 26 March 2015, the Board received details of progress in developing the Joint Health and Wellbeing Strategy since that meeting and considered approaches to delivering the Strategy.

It was reported that further consultation on the Strategy had been undertaken which included a workshop to look at the 'Place' section of the Strategy and a presentation and discussion at the Clinical Commissioning Group Board meeting. The key outcomes from this further consultation was that 'Place' should be incorporated throughout the Strategy, in the same way as mental health and that the Board could consider key areas to champion each year.

As agreed at the last Board meeting, the Board considered whether a more focused approach could be achieved by identifying three key areas each year where action across the system would be specified in more detail and progress and impact of activity closely monitored, rather than retaining a broad range of activity.

The Board noted that initial discussions had been held to consider the best ways of engaging and broadening links with the local business community and partner organisations in Milton Keynes, and that the Strategy now made direct reference to the Care Act and its emphasis on the promotion of wellbeing.

It was also reported that in order to be able to assess the impact of delivery of key areas of the Strategy a small set of outcome measures would be developed to be taken in year one and year three to show the overall impact of the Strategy.

The Board also recognised that a number of comments had been received after the report for the Board had been prepared and also that feedback and comment on the Strategy would be ongoing, therefore before inclusion of further detail and topics into the Strategy further reports would be brought to the Board.

RESOLVED

1. That the draft Joint Health and Wellbeing Strategy be adopted as the overarching document that will influence commissioning decisions and actions to improve health and wellbeing over the next three years.
2. That the following approach to the delivery of the Strategy be adopted:
 - (a) three key areas of focus be identified each year, which in 2015/16 will be domestic violence, adult obesity and social isolation in older people;
 - (b) supporting for the intention to develop local, community based health and wellbeing plans;

- (c) the Strategic Implementation Group ensuring that key outcome measures for year one and year three are developed and monitored;
 - (d) aligning a Board sponsor to each of the three high level priority areas (Starting Well, Living Well and Ageing Well); and
 - (e) refreshing the Strategy annually to help ensure a continued focus on key and current areas.
3. That an approach to the additional comments in respect of the Joint Health and Wellbeing Strategy be determined and considered by the Board at a future meeting.

HWB04

DEVELOPMENT OF THE BOARD

The Board considered requesting a Local Government Association peer review to enable the Board to receive recommendations for improvement, including success criteria, together with help in identifying best practice and achieving the optimum membership.

The Board also considered measures it could put in place in advance of the Peer Review to make the Board's meetings more focused on delivery.

RESOLVED –

1. That an Local Government Association Peer Review be requested in order to explore best practice including ensuring productive meetings, Board composition, working with partners and maximising opportunities to improve outcomes.
2. That the Board complement its regular scheduled meetings with working group meetings in order to ensure that its formal meetings are as outcome focussed as possible.
3. That a full training and personal development programme for Board members be developed.

(Dr N Smith, Vice-Chair in the Chair.)

HWB05

HEALTH & WELLBEING BOARD MEMBERS' ITEMS

Lorna Payne (Central and North West London NHS Foundation Trust) reported that CQC had reported on the Trust's services and a Borough specific report would be made available to members of the Board in due course. Ms Payne indicated that the findings in the overall report referred to some inadequacies in Adult Acute Mental Health Wards, however, CQC had clarified that the comments did not relate to services provided by the Trust at the Campbell Centre in Milton Keynes.

HWB06

BETTER CARE FUND

The Board considered work undertaken regarding the Better Care Fund Plan which was aimed at reducing hospital admissions by 3.5%, developing robust and sustainable community health and social care services and promoting independent living.

It was reported that a Better Care Fund Plan was submitted in April 2014, subsequently updated in September 2014 in line with new guidance, and consisted of 18 proposed schemes to be phased in over three years. The Council received confirmation that the Plan had been approved in February 2015.

It was also reported that a delivery group, which included representation from local providers of health, social care and the voluntary sector, had been established to jointly develop, own, drive and deliver the schemes which comprised the Better Care Fund Plan.

The Board noted that a number of the schemes which comprised the Plan were already live, or would become live during 2015/16. The schemes included provision of:

- (a) 24/7 Rapid Response;
- (b) Locality Multi-Disciplinary Teams;
- (c) Wellbeing Assessments;
- (d) A Recuperation Pathway;
- (e) Community Equipment;
- (f) Alcohol Liaison Services;
- (g) A High Impact Team for Care Homes;
- (h) A Community Dementia Service;
- (i) A Community based Falls Prevention Pathway; and
- (j) Social Isolation Research.

The Board also noted that there was a risk that if the target for reducing unplanned emergency hospital admissions was not achieved; this could lead to a reduced amount of funding available to implement the Better Care Fund Plan.

The Board was advised that the Better Care Fund Plan contained detailed performance targets. Performance of the various schemes would be closely monitored and reported to both the Board and the Board of the Clinical Commissioning Group on regular occasions. It was recognised that the reports needed to provide information which would allow the Board to make an assessment of progress against a baseline.

It was suggested that to help the Board understand the positive difference the Fund was making to peoples' lives, that the Board could be presented with case studies of how people had benefited.

It was also suggested that the Board should receive the first progress report at its next meeting in September and, at that meeting, review how frequently it would wish to receive progress reports and if the information presented met the Board's needs.

The Board was also advised that planning for the development of the 2016/17 schemes had also commenced.

RESOLVED –

1. That the progress being made towards the delivery of the Better Care Fund Plan be noted and supported.
2. That the Board receive a progress report on the delivery of the Better Care Fund Plan, including examples of experiences of patients who had benefited from the additional funding under the Better Care Fund.

HWB07 HEALTHWATCH UPDATE

The Board received the update from Milton Keynes Healthwatch and noted that the Healthwatch Annual General Meeting would be held on 30 September 2015.

HWB08 SUMMARY OF ACTIONS AGREED AND FORWARD PLAN

The Board considered the Agenda Plan for the Board's next meeting on 10 September 2015, noting the addition of a Better Care Fund Plan Progress Report.

The Board also considered whether Groups, other than Healthwatch, should have opportunity to submit written updates and whether the Board, at a future meeting, should review its key functions. It was suggested that the Peer Review, agreed earlier, could be requested to include such matters as part of its review.

RESOLVED –

1. That the Forward Plan for the next meeting on 10 September 2015 be agreed.
2. That the Peer Review include:
 - (a) a review of the key functions of the Board; and
 - (b) the possibility of members of the Board, in addition of Healthwatch, being given the opportunity to submit written updates of significant matters arising from their organisations.

THE CHAIR CLOSED THE MEETING AT 7.15 PM