

Health and Wellbeing Board
Minutes of the meeting held on Tuesday 6 May 2014
at 9.30am in Room 16, Abbey Conference Centre, Norwich

Present:

Mr D Roper, Norfolk County Council – Chairman

William Armstrong	Healthwatch Norfolk
Brenda Arthur	Norwich City Council
James Joyce	Cabinet Member, Safeguarding Children, NCC
Harold Bodmer	Director of Community Services, NCC
Dr Jon Bryson	South Norfolk Clinical Commissioning Group
Dan Mobbs	Voluntary Sector representative
Mark Taylor	North Norfolk Clinical Commissioning Group
David Matthews	NHS England, East Anglia Team
Angie Fitch-Tillett	North Norfolk District Council
Anne Gibson	Chief Executive (Acting) NCC
Joyce Hopwood	Voluntary Sector Representative
Cllr Penny Linden	Great Yarmouth Borough Council
Sheila Lock	Interim Director of Children's Services, NCC
Dr Ian Mack	West Norfolk Clinical Commissioning Group
Lucy Macleod	Acting Director of Public Health
Dr Chris Price	Norwich Clinical Commissioning Group
Cllr Andrew Proctor	Broadland District Council
Dr John Stammers	Great Yarmouth & Waveney Clinical Commissioning Group
Cllr Lynda Turner	Breckland District Council
Stephen Wells	West Norfolk Clinical Commissioning Group
Sue Whitaker	Cabinet Member Adult Social Services, NCC
Richard Draper	Voluntary Sector Representative

Others present:

Debbie Bartlett, Head of Planning, Performance and Partnerships, NCC

1 Apologies

Apologies were received from Cllr Elizabeth Nockolds, King's Lynn and West Norfolk Borough Council; Cllr Yvonne Bendle, South Norfolk District Council (Lisa Neal substituted), Stephen Bett, Norfolk Police and Crime Commissioner; T/ACC Nick Dean, Norfolk Constabulary; Chris Price, Norwich Clinical Commissioning Group (Jonathan Fagge substituted), Tracy Dowling, NHS England (David Matthews substituted).

2 Minutes of the Health and Wellbeing Board held on 1 April 2014

The minutes of the Health and Wellbeing Board (H&WB) meeting held on 1 April 2014 were agreed as a correct record and signed by the Chairman.

3 Members to declare any interest

There were no declarations of interest.

4 To receive any items of urgent business

There were no items of urgent business.

5 Joint Health and Wellbeing Strategy 2014-17

5.1 The Board received a presentation from the Acting Director of Public Health providing the final draft of the Joint Health and Wellbeing Strategy for 2014-17.

5.2 During the discussion, the following points were made;

- It was essential that every area represented on the Board was committed to driving their own area of progress in the strategy.
- There was a need for synergy between various parts of the strategy in order to maximise our efforts. There were obvious opportunities available for the Board to make a difference.
- The voluntary sector had been involved in the development of plans so far and were keen to continue to do so and to seize the opportunities.
- Mental Health was a theme that ran through all of the three priorities, however, it needed to be properly reflected in the Strategy and the importance of its impact would need to be recognised. It might be useful for the Board to have an update on the work of the Norfolk & Suffolk Dementia Alliance as part of its further discussion.

5.3 RESOLVED

- To approve the content of the 2014/17 Joint Health and Wellbeing Strategy, subject to the addition of statement to make explicit the key role that mental health and wellbeing play in the strategy.
- To endorse the development and implementation of the action plans that will support the delivery of the priorities of the strategy.
- To review and re-scope the Strategy Group as a Steering Group for implementation.
- To endorse the need for champions in each of the three priorities in the implementation of the strategy and this would be agreed at the next meeting.

6 Clinical Commissioning Groups: 2 year operational plans 2014-16

6.1 The Board received a presentation which outlined the some of the key themes from the Clinical Commissioning Groups (CCG's) operational plans for the period 2014 to 2016.

6.2 During the discussion, the following key points were noted;

- Integration was a theme common to all. The CCGS were working hard with County Council and the districts to be able to implement an integrated care system and the Better Care Fund was important within this and would radically change the way we work.
- There was hugely challenging work over the next few years and very difficult decisions would need to be made, within tight timescales.
- The plans from the CCG's were considered carefully by the Board and it was noted that the plans followed a standard national template to enable the assurance

process.

- There was discussion of some of the key challenges faced by all CCGs and the question of whether there was a role for the H&WB in monitoring the plans and measuring the outcomes.
- There was a suggestion was that the key role of the Health and Wellbeing Board was in bringing partners together and so it could decide to draw out 4 or 5 key things and track them to see how our collaborative working was making a difference – ie to monitor our ability to add value.
- Following further discussion the Board arrived at the view that we should use the H&WB's three overarching goals to look at this - ie through the themes of prevention, integration and reducing inequalities. The Board should focus on the things that partners want to focus on as a system.
- The JSNA Steering Group had looked at possible measures around the overarching goals and this could be fed into the further discussions and development of a performance framework for the Board for the next 6 – 12 months.
- It was also suggested that a framework of timescales for tasks and the progress made on the task. Annual workshops could be useful to aid completion of work.

6.3 **RESOLVED**

- To note the plans

7 **Clinical Commissioning Groups: Extracts from Draft Annual Reports 2013-14**

- 7.1 The Board received reports which provided relevant extracts of the CCG's draft Annual Reports 2013/14. The reports brought together the reviews prepared by each of the CCG's to the extent to which the CCG had contributed for the delivery of the joint health and wellbeing strategy.
- 7.2 The representatives from the CCG's reminded the Board that the distributed reports were only extracts of the final draft Reports and the full versions had similar themes in each of them.
- 7.3 The Board **ENDORSED** the draft Annual Reports.

8 **Healthwatch Norfolk – update on current activities (presentation)**

- 8.1 The Board received and **NOTED** a presentation from the Chief Executive and the Chairman of HealthWatch Norfolk (HWN) which updated the Board on the progress which had been made by the newly developed organisation. It also outlined the priorities for HWN for 2014/15.

9 **Children's Services Improvement Update**

- 9.1 The Board received a presentation from the Interim Director of Children's Services which informed the Board about the improvement planning and the progress which had been made in Children's Services.

9.2 The following points and actions were noted during the discussion:

- It was noted by the Board that progress was being made and partners agreed that there were clear opportunities for working closely together.
- In response to a suggestion, the Interim Director of Children's Services was asked to look at ways of bringing a young person's voice to the H&WB 'table'.

9.3 **RESOLVED**

- To have a formal link with the Children and Young Person's Strategic Group.
- To note the presentation.

10 Health and Wellbeing Board – Budget Report

10.1 The Board received a report by Head of Planning, Partnerships and Performance which set out the Health and Wellbeing Board's funding arrangements and outlined both the expenditure to date and proposals for 2014-15.

10.2 During the discussion, the following points were noted;

- Members did not feel they had sufficient information to make a decision about the further allocation of funding for community-based health improvement and whether, for example, the work was delivering value for money. It was agreed to postpone the decision until the July meeting, when they would have reports on both the H&WB's Healthy Communities Programme as well as its locally-led health improvement activity, which had been funded by the Board last year.
- The Board noted that a decision had been taken, in principle, by the Chair and Vice Chairs to renew the £70k funding for one year for the Voluntary Sector Engagement Project (VSEP) to enable continued support in securing the active engagement of the voluntary sector in the work of the H&WB.

10.3 **RESOLVED** to endorse the decision taken, in principle, by the Chair and Vice Chairs to renew the £70k funding for one year for the VSEP.

11 Voluntary Sector Engagement Project – End of year update report 2013/14

11.1 The Board received a report by the Head of Operations, Voluntary Norfolk which outlined the work of the Voluntary Sector Engagement Project (VSEP) in bringing the active engagement of the voluntary sector into the work of the Health and Wellbeing Board and the wider health and wellbeing agenda. It outlined the focus of the project, set out key activities over the past 12 months and identified key areas of future work.

11.2 **RESOLVED;**

- To endorse the work of the VSEP over the last 12 months as set out in appendix 1.
- To note the focus of the work for the coming year.

12 Norfolk County Council budget 2014/15 – Implications for the Health and Wellbeing Board

12.1 The Board received the report from the Head of Planning, Performance and Partnerships,

NCC which updated the Board on the outcome of the Putting People First consultation, and budget setting process undertaken by Norfolk County Council. It outlined the likely implications of the budget on the Board's overarching goals and priorities, and the ongoing risks for Norfolk people, the Board and the Council. The report described the changes to proposals and the mitigating actions that would be out in place to help manage some of the identified impacts, and described the further £22 million savings the Council must identify before 2017.

12.2 During the discussion, the following points were noted;

- It was clarified that lobbying on Central Government had been taking place from the LGA, to ensure that they were aware of the effect that the cuts are impacting on local people.
- Monitoring was paramount to ensure that the evidence was gathered to show that the cuts were having an effect.
- The Better Care Fund provided an opportunity to do things very differently.

12.3 The Board **RESOLVED** to note the report.

13 Joint Health and Wellbeing Board Strategy 2013-14 end of year report

13.1 The Board received and **NOTED** a report by the Head of Planning, Performance and Partnerships which updated the members on the progress that had been made with the implementation of the 2013/14 Joint Health and Wellbeing Strategy (JHWBS). The Strategy had been initially developed by the shadow Health and Wellbeing Board and agreed in principle by the Health and Wellbeing Board in October 2012. The focus since then had been to respond to the 11 priorities that were identified, and this had been through a number of forms, led by different groups and organisations and real progress had been made in a number of areas.

14 Annual Review of Membership, Terms of Reference and Forward Plan

14.1 The Board received a report by the Head of Planning, Performance and Partnerships which set out the Health and Wellbeing Board's current membership, terms of reference and forward plan. It provided an opportunity for the Board to review the existing arrangements and for comments to be taken into account by the County Council at the next appropriate stage. It also enabled the Board to review and comment on its forward plan of work for the coming year.

14.2 During the discussion, the following points were noted;

- This was an opportunity to think about the overall aims of the Board – it has a large membership and a big agenda, and the Board needed to be able to focus on performance.
- JH&WBS champions would help formalise the links with the Board and a 'User's Voice' would help to keep us in touch with those using our services.
- Health & Wellbeing Boards are still relatively new initiatives around the Country and therefore we were taking steps to learn from each other.
- This is a time of considerable change – including structural and organisational change – and, for the time-being, continuity was needed rather than major change. The Board needed to focus on setting some direction and targets and for all partners to work together outside of the formal meetings to ensure the get things done.

14.3 **RESOLVED**

- To agree the forward plan for the year ahead.
- To focus on consolidating the Board's ways of working and refinement of the sub-structure/links

15 Healthwatch Norfolk minutes

15.1 The H&WB received and **noted** the Healthwatch Norfolk minutes of the meeting held on 11 November 2013 and 20 January 2014.

16 NHS England verbal update

16.1 There was no update given.

17 Norfolk Health Overview and Scrutiny Committee Meeting minutes

17.1 The Board received and **noted** the minutes from the Norfolk Health Overview and Scrutiny Committee meetings held on 16 January 2014 and 27 February 2014.

18 NHS England Primary Care Strategy

18.1 The NHS England representative reported that this draft had been circulated to Members for information. It remained under development and would be brought to a future meeting.

The next meeting would take place on **Wednesday 16 July 2014** at 9.30m. The venue would be confirmed.

The meeting closed at 12.35pm

Chairman