

# Health & Wellbeing Board

A meeting of Health & Wellbeing Board was held on Wednesday, 25th June, 2014.

**Present:** Cllr Jim Beall(Chairman), Cllr Mrs Ann McCoy, Alan Foster, Tony Beckwith, Jane Humphreys, Peter Kelly, Audrey Pickstock, Paul Williams, Ali Wilson

**Officers:** Emma Champley, Sarah Bowman (PH); Margaret Waggott, Michael Henderson (LD); Liz Hanley (CESC)

**Also in attendance:** Councillor Robert Cook

**Apologies:** Cllr David Harrington, Cllr Ken Lupton, Cllr Steve Walmsley, Barry Coppinger

## **HWB Declarations of Interest**

**22/14**

There were no declarations of interest.

## **HWB Minutes of the meeting held on 21 May 2014.**

**23/14**

### **to follow**

The minutes of the meeting held on 21st May 2014 were agreed, subject to the minute relating to the Better Care Fund being amended to indicate that the Government had sought further assurances that NHS providers had been involved in the development of BCF plans.

## **HWB Commissioning Group Minutes**

**24/14**

The minutes of the following meetings were noted by the Board:

Children and Young People's Health and Wellbeing Commissioning Group held on 31 March 2014 and 17 April 2014.

Adults' Health and Wellbeing Commissioning Group held on 28 April 2014.

## **HWB Co -commissioning of Primary Care - presentation**

**25/14**

Members were provided with a presentation relating to Co-commissioning of Primary Care Services.

Co commissioning would expand the role of CCGs in primary care provision, giving them greater influence over the way NHS funding was being invested for their local populations.

Members noted the anticipated benefits of co commissioning, including;

- Greater integration of health and care services.
- raising standards of quality
- enhance patient and public involvement.
- tackling inequalities.

The Board was provided with details of a possible Governance Process for Co-commissioning and, it was explained that, the Board would be key in

considering/scrutinising any plans prior to submission to the Governing Body.

The application process would involve the submission of expressions of interest, to the Area Team, to develop new arrangements for co commissioning of primary care services.

RESOLVED that the information be noted and an update be provided to the Board when the response to the Expression of Interest had been received.

**HWB  
26/14**      **Access to Health Services**

The Board was provided with a report prepared by Healthwatch Stockton on Tees that provided some insights into the way in which residents of the Borough gained access to care and what could be the stumbling blocks to gaining access. The report was not intended to be comprehensive in its coverage of all the issues but did show the experience Healthwatch had gained over the past year in helping people find the right service in a timely way.

The report:-

- briefly explored some of the traditional obstacles to accessing care.
- identified the various ways in which people could access care and, in some cases, typical experiences of residents in doing so.
- examined how people might be able to help themselves within the present arrangements and how that might change. It incorporated how people could make use of the choices available to them.
- raised some relevant stories of experiences that people had of the present arrangements.
- suggests how the system might change to help people get early and cost effective care, recognising that some issues were more nationally based than local

The report pointed to the publication of a national report 'Transforming Primary Care' and the Council's Adult Services and Health Select Committee's 'Review of Access to GP, Urgent and Emergency Care' and indicated that these documents had been really helpful in identifying both the problems faced by services and patients/potential patients. The Board was provided with the executive summaries of the documents and was signposted to the full reports.

The Board discussed the issues raised in the report and related matters:-

- GPs' websites and the difficulty patients had in understanding the processes and information.
- GPs lists and a suggestion that some lists in the Borough were closed to new patients. The NHS England representative asked for details of specific incidents to be sent to her, for investigation.
- efforts to increase capacity in GPs, nationally, by expanding the role of other

providers and, locally, via initiatives like "Doctor 1st"  
- patient confusion over referrals e.g hospital doctors needing to write to a patient's GP, asking them to prescribe medication; dentists and opticians being unable to refer directly to a specialist and having to write to the GP. The Board noted that referral to a GP allowed a co-ordinated approach to a patient's care and placed the overview of a patient's medical history and medication with one person. However, efforts were being made to maximise the number of pathways where it was not necessary to refer via GPs.

It was suggested that the report be referred to the Council's Adult Services and Health Select Committee. As detailed above, the Select Committee had completed a review of Access to Services and many of the issues highlighted in the Healthwatch report were aligned with the Select Committees findings and recommendations. The Select Committee could, if it wished, take the issues detailed in the Healthwatch report forward and monitor any outcomes.

RESOLVED that:

1. the report and its conclusions be noted by the Board and each member organisation.
2. the report be referred to the Council's Adult Services and Health Select Committee, as described above.
3. specific issues relating to GP lists in Stockton Borough, as mentioned above, be forwarded to NHS England.

**HWB  
27/14**

### **Commissioning of comprehensive sexual health services**

Members received a report relating to the commissioning of sexual health services.

It was explained that the Council had a statutory responsibility to commission comprehensive, open access sexual health services to the local population.

The Board noted that the Council jointly commissioned, with Middlesbrough, Hartlepool and Redcar and Cleveland Borough Councils, integrated and community based sexual health services. The reasons for this model included convenience (e.g. close to place of work/education), transport, confidentiality and popularity of clinics.

The existing contract was with Assura (Virgin Care) which would end in January 2016. A service review was planned to start in autumn 2014 and would inform the procurement process in 2015.

Members considered options and recommendations for procuring sexual health services at the end of the current contract.

The Board was provided with details of advantages associated with continuing to commission using the current Tees integrated service model. Advantages associated with independent commissioning by each Council were also provided.

Members noted the utilisation patterns of sexual health across the 4 Tees Valley authorities.

It was considered that a continued Tees integrated service would be the best option but with separate contractual agreements for each authority, building in the flexibility to allow local variation that reflected locality specific needs.

Members were keen that any contract made certain groups, such as sex workers, more valuable to a provider. It was noted that this could be reflected via the payment model, which would be looked at in the Teesside Sexual Health Service Review.

RESOLVED that:

1. the statutory responsibility of the Council to commission sexual health services be noted.
2. the Board note that the current joint commissioning arrangements for community based sexual health services was due to end in January 2016.
3. the utilisation patterns of sexual health service users be noted.
4. it be agreed that the Council works with Middlesbrough, Hartlepool and Redcar and Cleveland Councils to jointly commission a sexual health service for Teesside, with separate contract arrangements for each Local Authority area.

**HWB  
28/14**

#### **Domestic Abuse Strategy**

Members were provided with a report that presented a proposed Domestic Abuse Strategy for 2014 - 2017, that had been developed following a comprehensive review and consultation process. The Board was also provided with the Strategy's first year Action Plan.

Members noted that, if approved, the Strategy would be widely circulated. It was agreed that it was important to highlight the strategy and use communication opportunities such as Stockton News. It was also suggested that a summary leaflet would be helpful and could signpost people to the full strategy.

RESOLVED that the Stockton on Tees Domestic Abuse Strategy 2014 - 2017, and its accompanying first year Action Plan, be endorsed.

**HWB  
29/14**

#### **Health and Wellbeing Board - Review of Board and Partnership Structure**

Members were reminded that , on its inception the Board had agreed to review its structures after approximately one year. A review had been undertaken and Members were provided with a report that detailed proposed changes to the structures supporting the Board.

The changes would include:

- the end of the Health and Wellbeing Partnership.
- the creation of a Children and Young People's Partnership and a

Adults' Health and Wellbeing Partnership with new Terms of Reference and membership.

- Revised terms of reference for the Council's Children and Young People's Health and Wellbeing Commissioning Group and Adults' Health and Wellbeing Commissioning Group.
- revised Terms of Reference and membership for the Board
- the end of certain Groups, with their activities being incorporated into the new structure.

During consideration of the membership of the Board it was agreed that Catalyst be invited to appoint a representative from September 2014.

Members were asked to provide any further comments on the proposals and draft action plan to the Director of Public Health.

RESOLVED that:

1. the proposals detailed in the report be agreed and recommended for approval to Cabinet and Council, subject to any necessary amendments being made by the Director of Public Health, in consultation with the Chairman, following the receipt of any further comments from Board member.
2. the draft development action plan be approved, with any necessary amendments being made by the Director of Public Health, in consultation with the Chairman, following the receipt of any further comments from Board members.
3. the Board receives quarterly monitoring reports against the development action plan.

**HWB  
30/14      Development Session - Dementia**

Members received a presentation relating to Dementia and the Stockton on Tees response to it.

The Board noted that dementia was a term used to describe a collection of symptoms, which could include decline in memory, reasoning and the ability to communicate, a gradual loss of skills needed to carry out daily activities. The greatest risk factor for developing dementia was age.

Members were provided with details of the prevalence and diagnosis of dementia in Stockton, as well as the current and predicted prevalence of dementia in the North East. A brief overview of the National Dementia Strategy and Prime Minister's Challenge was also provided.

The Board was given an update on the work of the North of Tees Dementia Collaborative. It was explained that the aim of the collaboration was to deliver large scale change across organisational boundaries, ensure that the commissioning and delivery of dementia services were of the highest quality and that the requirements of the National Dementia Strategy and Prime Minister's challenge were being met.

Members noted the improvement activity of the collaborative which included:

- continuing Healthcare Pathway.
- developing care home staff skills to prevent hospital admissions.
- reablement Pathways
- end of Life care

During its first year the collaborative had improved working relationships and outcomes for clients and carers, however, it had been evident that too much improvement activity had been undertaken in year one and time was needed to 'take stock'

The second year priorities would include:

- focusing on getting consistency in new processes introduced.
- involvement of service users as well as carers
- Launch and role out access of the Live Well Hub facilities.

RESOLVED that the presentation be noted.

**HWB  
31/14**      **Forward Plan**

The Board considered the Forward Plan and Members were asked to consider any items that they may wish to have included.

RESOLVED that the Forward Plan be approved.

**HWB  
32/14**      **Chairman's Updates**

There were no updates.