

**SHADOW HEALTH AND WELLBEING
BOARD
6 DECEMBER 2012
2.00 - 3.50 PM**



Present:

Dr Tong, Bracknell Forest & Ascot CCG (Chairman)
Councillor Dr Barnard, Executive Member for Children, Young People & Learning
Janette Karklins, Director of Children, Young People & Learning
Debra Ogles, Local Involvement Network (substitute)
Mary Purnell, Bracknell Forest & Ascot CCG
Tim Wheadon, Chief Executive

Apologies for absence were received from:

Councillor Birch, Executive Member for Adult Services, Health & Housing
Barbara Briggs, Local Involvement Network
Glyn Jones, Director of Adult Social Care, Health & Housing
Dr Pat Riordan, Director of Public Health for Berkshire (East)

Also Present:

Councillor Virgo, Chairman of the Health O&S Panel
Sandra Davies, Children's Trust Business Manager
Zoe Johnstone, Chief Officer, Adults and Joint Commissioning
Lise Llwellyn, Health consultant
Kieth Naylor, Joint Commissioning Officer

32. Declarations of Interest

There were no declarations of interest.

33. Urgent Items of Business

No items of urgent business were raised.

34. Minutes from Previous Meeting

RESOLVED that the minutes of the Board meeting held on 11 October 2012 were confirmed as a correct record.

35. Matters Arising

Minute 28: Special Educational Needs (SEN) Arrangements

At the last meeting of the Board, the Director of Children, Young People & Learning was asked to headline the specific SEN duties/expectations that would be made on the CCG so that the appropriate colleague could participate in the discussions.

The Director CYPL reported that the specific duties and responsibilities for CCG's were detailed on pages 7 and 8 of the agenda papers. The legislative framework for SEN was also provided, it was anticipated that legislation would receive Royal Assent

in April 2013; this would lead to changes in the way that SEN was currently funded coming into force in April 2013.

The Director CYPL stated that she was happy to follow up this information with meetings to discuss issues in greater detail.

Dr Tong stated that he would take this information back to his governing body for further discussion. It was clear that mechanisms needed to be established, between the local authority and CCG to progress this work and to meet statutory responsibilities.

Mary Purnell stated that Children's Services was an area that the CCG needed to provide greater focus upon to ensure that mechanisms were in place.

Kieth Naylor stated that work around Children's Services and in particular SEN, would need to be demonstrably aligned to the Health & Wellbeing Strategy and would need to take account of the future requirements of the JSNA. It was clear that the Board were at a stage where they were identifying and connecting. The Board agreed to consider SEN arrangements at their next meeting in February 2013, to monitor how much progress had been made in this area, as significant progress would be required before April 2013.

The Director CYPL reported that the pathfinder reporting had been delayed to 2013-14, which created difficulties in terms of learning from pathfinder experiences.

It was noted that local Healthwatch would be in place by April 2013 and they could be commissioned to carry out some work around this area.

In summary, the Board would work to:

Ensure that an equal and explicit obligation to determine arrangements to secure the commissioning of quality, consistent and comprehensive health and local government services for all, including children, young people, parents, families and carers, through the:

- a) preparation of an enhanced JSNA in accordance with Section 192 of the Act and subsequent Regulation 1 that considers:
- b) use existing or commission in partnership new mechanisms as required to engage with and involve patients and the public, including children and young people, parents and families, to secure and evidence their views and inform the deliberations of the Board and its business.
- c) Agreement of the Local Healthwatch forward plan in the spirit of section 26 of the Act.
- d) Development of a Joint Health and Wellbeing Strategy in accordance with Section 193.
- e) Agreement of CCG commissioning plans in accordance with Section 26 of the Act.

36. **Local Safeguarding Children's Board Recommendations**

The Board was asked to note the LSCB's Annual Report regarding the effectiveness of safeguarding and child protection practice in the Bracknell Forest locality and to note the recommendations included on page 2 of the supplementary agenda papers.

Ms Alex Walters, LSCB Independent Chair attended the meeting and reported the following to the Board:

- The LSCB was a statutory partnership and its profile and expectations had been strengthened recently by the government. The role of independent chair was to provide an independent voice which was independent of all partner organisations.
- The LSCB's Annual report reflected the activity of the LSCB, its achievements and challenges. The LSCB existed to make a real difference to children's lives and the implementation of the LSCB's action plan aimed to make these real changes.
- The LSCB's strategic priorities for 2011-2013 were detailed on page 8 of the supplementary agenda papers.

Dr Tong thanked Ms Walters for her presentation and stated that the Board had a statutory responsibility to ensure connections were strong and effective. A critical role in this work would be the CCG's Practice Nurse who was yet to be appointed. A recruitment exercise had taken place but an appointment was not made. It was anticipated that an appointment would be made in the upcoming weeks.

Ms Walters advised that the Board may wish to consider requesting that the LSCB provide them with a report that detailed the changes that have been proposed as a result of the findings of the recent serious case review and the evidence from partner organisations that these changes have been made.

The Board agreed that this would be useful and a report in six months time from the LSCB would be timely, six months would allow organisations an opportunity to establish changes. It would be useful for the report to include detail of each organisations performance in relation to safeguarding. It was agreed that this report would be submitted to the June 2013 Board meeting.

The Board noted that part of the challenge was that the recommendations arising from the serious case review were directed to specific organisations, some of these organisations no longer existed, this would make the process more difficult.

The Board noted that whilst some recommendations were organisation wide, others were specific to individuals and would need to be tackled with individual GP's. This would need to be done through the appraisal process for these GP's. Dr Tong commented that the CCG could provide a steer on this.

The Board noted the recommendations made by the LSCB to the Board as follows:

Recommendations to the Health & Wellbeing Board:

- 1) To ensure that CCG and other commissioned health providers adhere to Bracknell Forest LSCB's minimum safeguarding standards and have completed a satisfactory Section 11 self-assessment.
- 2) To ensure that the CCG has oversight of the recommendations from the Serious Case Review relating to General Practice and Health providers and ensures that the learning from the review informs the performance monitoring and quality assurance systems for CCGs and General Practice.

- 3) To ensure that the Health & Wellbeing Board and the local CCG has oversight of the recommendations from the 4 Case Review relating to General Practice, Health Visiting and Midwifery and ensures that the learning from the review informs the performance monitoring and quality assurance systems for CCGs.
- 4) That the Health & Wellbeing Board considers the advice provided by community health professionals on co-sleeping or bed-sharing and promotes safe sleeping arrangements for infants and small children.
- 5) That the Health & Wellbeing Board consider the potential application of the Exemplar Safeguarding Audit Tool to audit the child protection practice of health economy providers.

37. **Joint Health & Wellbeing Strategy**

The Chairman of the Health Overview and Scrutiny Panel was invited to present the views of the Overview and Scrutiny Working Group to the Board.

Councillor Virgo thanked Zoe Johnstone for all her work on the Strategy and stated that the O&S Working Group had followed the same work model when contributing their thoughts and submissions. He made the following points:

- The working group felt that the Strategy placed a heavy emphasis on children, young people and early intervention and that it was strongly felt that the message of healthy living should be transmitted to all sections of the community. In addition, the working group felt that more emphasis should be given to education in schools and not only to children of a very young age.
- More generally, the working group felt strongly that a strategy of this nature should be aimed at the whole community and not focussed on a specific age group.
- The working group also felt that the strategy should be drafted in very clear language to ensure it was accessible to all.

In conclusion, Councillor Virgo asked that the Board read the version submitted by the working group very carefully and consider incorporating some of their contributions.

The Board thanked Councillor Virgo and the working group for their contributions and agreed that the contributions of the working group would be taken into account when drafting the action plan to the strategy. The Board invited the overview and scrutiny working group to make suggestions as to the content of the action plan, Councillor Virgo welcomed this opportunity.

It was reported that mapping work around the frameworks in the strategy was already underway.

The Board agreed that a letter be sent on their behalf from the Chairman thanking the overview and scrutiny working group for their contributions and to inform them that their contributions would be taken into account when drafting the action plan to the strategy.

It was agreed that the Board would receive a draft of the action plan to the strategy at their April 2013 meeting. The Board agreed that the action plan should create a matrix which showed where accountabilities for delivery lay. The action plan should also show how the Board was adding value to the process.

It was **RESOLVED** that;

- i) the draft 'model' strategy be agreed subject to any amendments arising as a result of the discussion above.
- ii) The Board agreed membership of a working group to develop the approach to ongoing review and refresh of the strategy. (Zoe Johnstone)
- iii) The Board approved and made explicit the expectation that commissioning plans and service plans of relevant organisations responded to the priorities as set out in the Strategy and made appropriate interim arrangements for monitoring and performance management.

38. The Health & Wellbeing Board: April 2013 Onwards: A Formal Statutory Committee - Protocols

The Board received a report that advised them of the procedures and protocols that were likely to be necessary once the Board became statutory in April 2013. The Board noted that the Regulations would be laid in January 2013 and arrangements for statutory meetings could then be confirmed.

The Board noted that they would need to agree whether a public participation scheme should be put in place, to manage public engagement at meetings.

The Board also noted that the issue of whether officers should have voting rights was still being debated by the Department of Health.

It was **RESOLVED** that the Board noted the information and protocols required for a formal committee.

39. Bracknell Forest LINK Legacy Report

Debra Ogles, LINK Representative, reported that LINK had worked closely with partners to draft the LINK legacy report and that it was intended to provide a platform for the incoming Healthwatch organisation.

The report sought to make an assessment of the LINK against five key criteria suggested by the LGA and Department of Health:

- Outcomes and Impact
- Learning
- Relationships
- Capacities
- Public Engagement

The Board asked that their thanks be put on record to the LINK for all their work and the value that had been added as a result of their work.

Kieth Naylor reported that all potential providers of Healthwatch would be provided with the LINK legacy report to provide them with a foundation.

The Board noted that Healthwatch would need to be a strong organisation and individuals would need to be appointed primarily by skills competencies. In addition, the chair of Healthwatch would play a key role and would need to hold sufficient public weight as well as genuinely represent the views of local people. Processes

would need to be robust, transparent and open to challenge. It was noted that a tender for the organisation would be issued in the following week.

40. **Forward Plan**

Board members asked that the following items be added to the forward plan:

- Serious Case Review Learning: June 2013
- LSCB Business Plan: June 2013
- CYP&L Service Plan: December 2013 and December 2014
- Shaping the Future Results: April 2013

Board members raised the query as to who would take ownership of Shaping the Future as of January 2013. It was possible that stakeholders would hold differing views on this area of work. Dr Tong agreed to investigate who would be taking ownership of this work as of January 2013.

The Board discussed the issue of publicity around the Board's role as well as the role of the CCG and how this message could be best communicated. It was agreed that the message should be a combined message from both the CCG and the Board and must be communicated before the end of March 2013. The Chief Executive stated that the Council's Communications team would contact Mary Purnell to make arrangements for publicity. Consideration would also need to be given as to how Healthwatch would be publicised.

The Board agreed that the role of the Board needed to be clearly identified in any publicity and a distinction needed to be made between the Board's role and the role of Overview and Scrutiny, Healthwatch and any other health organisations.

The Board also considered the opportunity to use the April 2013 Board meeting as a launch meeting.

41. **Dates of Future Meetings**

The Board agreed future dates as follows:

11 April 2013
13 June 2013
22 August 2013
24 October 2013
12 December 2013

It was agreed that Board meetings scheduled on 21 February 2013 and 20 February 2014 would be rescheduled as they clashed with GP Council meetings.

CHAIRMAN