



**HEALTH AND WELLBEING BOARD
5 JUNE 2014
2.00 - 3.15 PM**

Present:

Councillor Dale Birch, Executive Member for Adult Services, Health & Housing (Chairman)
Councillor Dr Gareth Barnard, Executive Member for Children, Young People & Learning
Zoe Johnstone, Chief Officer: Adults and Joint Commissioning
Dr Janette Karklins, Director of Children, Young People & Learning
Timothy Wheadon, Chief Executive, Bracknell Forest Council
Dr Lise Llwellyn, Director of Public Health
Mary Purnell, Bracknell Forest & Ascot Clinical Commissioning Group
Mark Sanders, Local Healthwatch
Helen Clanchy, NHS England, Local Area Team

Apologies for absence were received from:

Dr Tong, Bracknell & Ascot Clinical Commissioning Group
Glyn Jones, Director of Adult Social Care, Health & Housing
Matthew Tait, NHS England, Local Area Team

Also Present:

Eve Baker, Bracknell & Ascot Clinical Commissioning Group
Lynne Lidster, Adult Social Care & Health
Lisa McNally, Public Health Consultant

97. Declarations of Interest

There were no declarations of interest.

98. Urgent Items of Business

There were no items of urgent business.

99. Minutes from Previous Meeting

RESOLVED that the minutes of the Health & Wellbeing Board held on 10 April 2014 be signed by the Chairman and approved as a correct record.

100. Matters Arising

There were no matters arising.

101. Public Participation

There were no submissions received under the Public Participation Scheme.

102. Child & Adolescent Mental Health Service (CAMHS) - Service Mapping

The Director of Children, Young People & Learning reported that the lead officers for each tier had met and would be meeting again in the following week. The Group were working towards reporting to the Board in September/October 2014 and were currently working on various work streams. Meetings with service users were also taking place on a fortnightly basis.

The Director of Public Health reported that Slough had begun to meet with service users and this work would be used as a template to review local arrangements. This work would be completed by the end of July 2014.

It was agreed that the findings/reports published from each review currently taking place on CAMHS would be circulated to all Board Members as soon as they were published.

The Board agreed that any 'quick wins' or other good practice changes that could be made immediately as a result of the findings of the reviews should be implemented immediately as this would impact children and young people and may be significant if improvements reaped benefits before the start of the school year in September 2014.

The Chief Executive stated that it would be important to reference the findings of each review in the report submitted to the Board in September. This would ensure the review of the service was coherent.

The Chairman asked that the Board be kept abreast of all progress or developments before the next Board meeting on 4 September.

103. **Better Care Fund Update**

The Chief Officer: Adults and Joint Commissioning reported that the resubmitted Better Care Fund (BCF) template made no changes to the total agreed value of the pooled BCF budget of £3.008m. This included seed investment funding of around £1.3m from Bracknell and Ascot Clinical Commissioning Group. The Board noted that additional funding could be made available from other funding sources as part of BCF service developments and improvement programmes that delivered the BCF objectives.

NHS England had requested changes to the allocation of its main NHS Section 256 transfer previously advised to the Board. The changes did not affect the overall value of the transfer and were set out in Annex 3 of the report. The new Section 256 Memorandum of Agreement reflecting the changes to allocation were set out in Annex 4 of the agenda papers.

Community Response and Reablement and Equipment services of approx. £2m were funded separately under NHS Section 75 agreements.

The delivery of the BCF objectives were presently focussed on a review of on-going service work streams, including progress on specific strategies and service improvement projects within the context of the Adult Social Care, Public Health and NHS Outcomes Framework and BCF specific national conditions and 6 performance indicators on which the success of the BCF was to be measured.

The Board noted that the changes included in the resubmitted template arose from feedback received since the last Board meeting. In addition, a revised template would be issued by NHS England on 26 June and therefore all information would need to be entered into this new template before submission.

It was **RESOLVED** that the Health & Wellbeing Board;

- i) noted the progress to date and the resubmission of the template attached as annex 2 (updated template would be issued on 26 June)
- ii) agreed Section 256 of the 2006 NHS Act – Memorandum of Agreement (draft Memorandum of Agreement at Annex 4 of the agenda papers)

104. **Future Population Growth and the Effect on Surgeries in Bracknell Forest**

The Healthwatch representative reported that Healthwatch had received an increasing volume of concerns raised by the public around the provision of surgeries around those areas where large developments of housings were being implemented. In particular, residents of Jennet's Park and Crowthorne were expressing great concern. There were also pressures in the north of the borough.

The Chairman reported that this issue was very much on the Council's radar and he would be meeting with the Executive Member for Planning and Transport to discuss this issue in the upcoming weeks. In terms of public concern it would be key to expel any myths and provide a clear statement to the public around what work was being undertaken to address this issue and how provision would be planned.

The Board noted that GP surgeries were separate entities from the NHS. The Council, Bracknell & Ascot Clinical Commissioning Group (BACCG) and the Local Area Team would be undertaking work to map the effect of strategic sites and would then advise the whole community of the provision that was planned. It was clear that expansions of existing provision would be considered in the first instance. It was anticipated that a message would be sent to the public in the summer around how provision would be planned. This would include an opportunity to expel myths by being clear about who was responsible for provision and how services would be delivered. The Local Area Team were asked to prepare a paper for the Board to this effect.

NHS England confirmed that there was currently not any GP surgeries in the borough that had closed lists. It was likely that some patients were experiencing access problems and where this was the case, NHS England was keen to hear about these issues.

The Board noted that the NHS planned provision of surgeries on the basis of one GP per 2000 adults. It was also clear that GP stand alone services were not the most efficient way to deliver services, a variety of provision to meet community needs would be the ideal way to deliver provision. It would also be important to consider cross boundary work and what opportunities this may create.

The Board asked that they be kept abreast of developments in this area. The BACCG representative stated that she would welcome any suggestions from the Board on this area of work. She reported that feedback had showed that the public wanted multipurpose access to a range of services and wanted to access services in differing ways such as via email and Skype. It would therefore be key to consider how capacity could be increased without necessarily more bricks and mortar.

The Board recognised that surgeries were often seen as a key community facility at the hub of each community.

105. **Update on the Frimley Park Acquisition of Heatherwood and Wexham Park Hospitals**

It was reported that Frimley Park NHS Trust were in the process of constructing their business case for the acquisition of Heatherwood and Wexham Park NHS Trust. Bracknell & Ascot Clinical Commissioning Group were working with Frimley Park on their clinical model. Frimley Park were also working closely with the Local Area Team. The proposed merger had successfully gone through competition and merger legislation and arrangements were now progressing well. It was hoped that the process would be successfully completed by the beginning of August 2014.

Healthwatch expressed concern that the public remained concerned as to the future of the Heatherwood Hospital site and what services would be delivered from this site. The Chairman agreed to seek clarification from Frimley Park's Chief Executive on this point and report back to Board members.

106. **Deprivation of Liberty Safeguards: Implications of Supreme Court Ruling**

The Board considered a report that advised them of the potential implications of a recent Supreme Court Ruling in relation to the Deprivation of Liberty Safeguards (DoLS). Part of the Mental Capacity Act 2005, but not implemented until 2009, Deprivation of Liberty Safeguards were intended to ensure that people who lacked capacity to consent to specific arrangements were not deprived of their liberty or restricted any more than was necessary and that there were legal routes to challenge situations where it was felt that the level of deprivation was inappropriate.

The processes in place were very prescribed and the Council would be taking a pragmatic approach as far as possible to this work. The implications of DoLS had been costed and resource implications considered, with a number of assumptions being made. There would be a more detailed report on DoLS submitted to the Board in due course.

It was **RESOLVED** that;

- i) the potential implications for the Council be noted and
- ii) the Board agree arrangements for ensuring appropriate availability of S12/DoLS doctors.

107. **Actions taken between meetings**

There were no actions to report between meetings.

108. **Forward Plan**

There were no additions or amendments made to the forward plan.

109. **Dates of Future Meeting**

4 September 2014
11 December 2014
5 March 2015

CHAIRMAN