

**Minutes of: HEALTH AND WELLBEING BOARD**

**Date of Meeting:** 14 November 2013

**Present:** Cabinet Member, Councillor R Shori;  
Deputy Cabinet Member, Councillor J Black;  
Chief Officer, CCG, Stuart North;  
Community Safety Partnership, Superintendent Mark Granby  
Executive Director, Childrens and Families, Mark Carriline;  
Healthwatch Chair, Andrew Ramwell;  
CCG Representative, Dr Audrey Gibson;  
Interim Director of Public Health, Lesley Jones;  
B3SDA, Dave Bevitt;  
NHS England, Rob Bellingham.

**Also in attendance:** Julie Edwards – Democratic Services  
Ian Chambers – Asst Director, Learning  
Julie Gonda – Asst Director, Commissioning and  
Procurement, substituting for the Executive Director for  
Adult Services  
Heather Crozier – Head of Customer Services

**Public Attendance:** 5 members of the public were present at the meeting.

**Apologies for Absence:** Executive Director of Adult Services, Pat Jones-  
Greenhalgh; Executive Director, EDS, Graham Atkinson;  
Dr K Patel

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**1. DECLARATIONS OF INTEREST**

There were no declarations of interest.

**2. MINUTES OF PREVIOUS MEETING**

**Delegated decision:**

The Minutes of the meeting of the Health and Wellbeing Board held on 17 September 2013 be approved as a correct record and signed by the Chair, subject to an amendment to minute HWB.370 to include all Local Authorities.

**3. MATTERS ARISING**

Members of the Board reviewed the Health and Wellbeing Board Action Log.

In response to a question from the Chair, the Assistant Director, Commissioning reported that proposals in relation to the virtual network hub are still being developed and a further update will be reported at the next meeting of the Health and Wellbeing Board.

**4. PUBLIC QUESTION TIME**

The Chair, Councillor R Shori, invited questions, comments and representations from members of the public present at the meeting.

Questions were asked and comments made on the issues detailed below.

In response to Councillor Walker's question with regards to the site formally occupied by the Peel Health Centre, the Chief Operating Officer, CCG reported that NHS England would in the next two months agree their capital programme. Democratic Services would contact Rob Bellingham, NHS England for an update in relation to the development of the site.

## **5. CHILDREN WITH ADDITIONAL NEEDS PARTNERSHIP GROUP**

Members of the Board considered a verbal presentation from the Assistant Director, Learning in relation to the reform of systems for children with special education needs and disability. The presentation contained the following information:

The Assistant Director, Learning reported that the Children and Families Bill reforms the system for children with special educational needs and disability.

The Bill will extend the SEN system from birth to 25, giving children, young people and their parents greater control and choice in decisions and ensuring needs are properly met.

The legislation will replace old statements with a new birth- to-25 education, health and care plan; offer families personal budgets; and improving cooperation between all the services that support children and their families, particularly requiring local authorities and health authorities to work together.

The Assistant Director, Learning reported that the changes will take effect from September 2014 and the council have been given £75,000 to support the implementation process.

The Assistant Director, Learning reported that a SEND implementation group has been established and is functioning well with all partners engaged in the process. A project implementation document is in place and regularly reviewed and updated.

The Assistant Director, learning reported that a review of school SEN provision is underway. A draft EHC plan has been agreed and initial plans drawn up with six families.

Questions were invited from those present at the meeting and the following points were raised:-

In response to a Board members question, The Assistant Director, Learning reported that the use and quality of data needs strengthening and it will be necessary to raise awareness of the SEND agenda with partner agencies in particular those partners in health.

The Assistant Director, Learning reported that stronger links will be needed with parallel developments in Health, Social Care, and in respect of public service reform.

In response to a Board members question the Assistant Director, Learning reported that the Local Authority would provide briefings for school governors in relation to the proposed changes.

The Assistant Director, Learning reported that the implementation group would continue to identify new ways to capture young people's and parents views.

### **Delegated decision**

The Assistant Director, learning be thanked for his attendance and further updates in relation to the reform of the system for children with special education needs and disability be reported to a future meeting of the Health and Wellbeing Board.

## **6. NHS TRANSFER OF FUNDING TO SOCIAL CARE**

Julie Gonda, Assistant Director, Commissioning and Procurement Adult Services, presented an overview of the transfer of funds from the NHS to the Local Authority. An accompanying report had been submitted to the Board providing an update on the transfer of funds, the principles for the use of this funding for 2013/14 and the proposed transfer of funds from the NHS from 2014/15

The Assistant Director, Commissioning reported that the transfer is to be made in line with the Department of Health gateway reference 18568. In essence this funding should be used for social care activity that impacts on health care and that reduces on going demand throughout the whole of the system of care.

For Bury, the sum to be transferred for 2013/14 amounts to £2.923million, which is an increase from £2.218million in 2011/12 and £2.127million in 2012/13. The conditions on the use of this funding have changed slightly – for the previous two years' allocations, local agreement was reached between the Local Authority and NHS Bury, and the transfer was made under Section 256 of the 2006 NHS Act directly from the PCT. For 2013/14, the local agreement is expected to be signed off by the Health & Well Being Board in addition to Bury's CCG and the Local Authority and the S256 agreement will be between the Local Authority and NHS England.

The Assistant Director, Commissioning and Procurement reported, that order to support the development of integrated health and social care services, the Department of Health have created an Integration Transformation Fund (ITF) from 2014/15 onwards.

The fund has been created to support a number of national priorities within the health and social care systems, namely:

Support some of the new responsibilities of Adult Social Care outlined within the Care Bill  
Integration of Health and Social Care where appropriate;

Provision of 'right care, right place, right time';  
Creation of a single pooled budget for health and social care in local areas, based on joint plans across the NHS and Local Authorities, again where appropriate;  
Transformation of care and support;  
Support demographic pressures in social care;

The ITF will be a pooled budget deployed locally on social care and health support. The local plans should be developed jointly between health and social care and will have to be agreed at local Health & Wellbeing Boards. It is expected that two year plans covering 2014/15 and 2015/16 will be drawn up by March 2014, setting out the planned use of the fund to transform care and support, including protection for social care services.

Questions were invited from those present at the meeting and the following points were raised:-

There was consensus from Board members that the money should be spent to address some of the wider determinants of health and that members would like future reports to contain more information in relation to actions to reduce unnecessary hospital admissions and health inequalities.

The Chief Officer, Citizens Advice Bureau reported that he would like to see greater third sector involvement in health prevention work, and further discussions at the Health and Wellbeing Board in relation to the impact of a 10% cut in funding from the Local Authority to partners in the voluntary sector.

The Chief Officer, CCG reported that the CCG is considerably underfunded compared to other CCG in the Northwest. The CCG will continue to lobby for an increase in funding and would ask for support from the Health and Wellbeing Board in doing this.

The Assistant Director, Commissioning reported that the funding detailed would not be new money and the Council are still awaiting the final settlement figure from central government.

Members discussed changes to the welfare system and the impact on partners and stakeholders, and in particular the potential impact on the health economy.

**Delegated decision:**

1. The Health and Wellbeing Board agree to the use of the NHS transfer allocation of £2.9m to social care for 2013/14.
2. The Health and Wellbeing Board note the new proposed transfer of funds to support integration from 2014/15 onwards.
3. Future financial reports presented to the Health and Wellbeing Board will include detailed information relating to the use of the transferred funds to reduce un-necessary hospital admissions and health inequalities, as well as, appropriately detailed financial information.
4. A report providing information relating to the impact of the welfare reform on the health economy be presented to a future meeting of the Health and Wellbeing Board.

**7. HEALTHIER TOGETHER**

The Chief Operating Officer CCG reported that a meeting of the Healthier Together Committee in Common will take place week commencing 18th November 2013 to discuss the Healthier Together consultation process.

**It was agreed:**

The Chief Operating Officer CCG and the Chair of the CCG will provide members of the Health and Wellbeing Board with a presentation on the proposals for consultation at the next meeting of the Health and Wellbeing Board.

**8. BURY, ROCHDALE AND OLDHAM CHILD DEATH OVERVIEW PANEL**

The Executive Director, Children's and Families gave a presentation providing an overview of the Bury, Rochdale and Oldham Child Death Overview Panel. An accompanying report had been submitted to the Board.

In April 2008, Bury, Rochdale and Oldham joined to form a tripartite arrangement following the recommendation made by the Department for Education that CDOP's require a total population of 500,000 or higher. The CDOP Annual Report was published in 2012.

The Executive Director Children's and Families reported that there were a total of 85 notifications (child deaths) made to the CDOP in 2011/12. The CDOP met 6 times between April 2011 and March 2012 and closed a total of 57 cases. The main factors considered by the CDOP in 2011/12 were safe sleeping arrangements, smoking by parents and deaths in children under one.

From 1st April 2011 to 31st March 2012 in Bury there were 21 notifications to the CDOP. The highest category in 2011/12 for Bury was chromosomal, genetic and congenital anomalies accounting for 38.4% of deaths.

The Executive Director Children's and Families reported that consanguinity continues to be an issue and that he would like to see the recommendations contained within the report inform the Joint Strategic Needs Assessment and the Health and Wellbeing Strategy.

**Delegate decision:**

The report be noted.

**9. PHARMACEUTICAL NEEDS ASSESSMENT**

The Health and Wellbeing Board considered a verbal update in relation to the pharmaceutical needs assessment (PNA) by the Interim Director of Public Health, Lesley Jones.

The last PNA was completed in February 2011, the assessment concluded that there was sufficient pharmacy provision across the Borough, a refreshed PNA will be produced by April 2015. The Greater Manchester Commissioning Unit have been chosen to support the process.

Rob Bellingham, NHS England reported that he would want NHS England to be involved in the drafting of the PNA to ensure a robust assessment process.

Members discussed the HWB's role in the development of the new PNA. Members agreed that the PNA should include detailed information in relation to the range and provision of services offered at each pharmacy. Members agreed that the mapping of pharmacy provision was essential to inform the development of the Borough's integrated care plan.

In response to a Board member's question, the Interim Director of Public Health reported that there will be opportunities for members of the public to comment on the PNA during a period of public consultation.

**Delegated decision:**

The Assistant Director of Legal and Democratic Services would provide legal advice to the Health and Wellbeing Board in relation to the Board's legal duties with regards to the Pharmaceutical Needs Assessment.

**10. AUTISM SELF EVALUATION**

Members of the Board considered the Autism self evaluation report.

The Assistant Director, Commissioning reported that document provided information relating to the implementation of the adult autism strategy; commissioning arrangements and eligibility criteria.

**Delegated Decision:**

Members of the Health and Wellbeing Board approve the information contained within Bury's "Improving Health and Lives: Learning Disabilities Observatory Autism Self Evaluation" document.

**11. JOINT STRATEGIC NEEDS ASSESSMENT**

The Interim Public Health Director gave a verbal presentation providing an overview of the refreshed Joint Strategic Needs Assessment (JSNA). An accompanying report had been submitted to the Board.

The Interim Director of Public Health reported that at the last Board meeting, the Board received a presentation on the findings from the draft JSNA report. The draft JSNA full report was subsequently circulated to the Board with a timeframe for any comments. As a result of that, some changes have been made in relation to relevant sections around children and young people to assist the validity of the

report. The Board has now been furnished with the final consultation version which incorporates these changes.

The Interim Director of Public Health reported that the statutory guidance around the production of JSNAs states that the views of key stakeholders be gathered as part of the JSNA, therefore a broad framework for consultation has been developed. The consultation aims to make as many people aware of the JSNA as possible by using websites and emails.

The JSNA document currently stands at over 90 pages long. The JSNA task and finish group will produce a leaflet style document to highlight the main priorities identified in the JSNA and this will be the basis for consultation.

Members of the Health and Wellbeing Board discussed how best to support the development of the JSNA. Members would like to see the information contained within the JSNA continually refreshed and the development of an electronic platform/website to enable partner/stakeholders and residents to better access the data.

**Delegated decision:**

That the Health and Wellbeing Board approve for consultation the revised Joint Strategic Needs Assessment.

That the Health and Wellbeing Board approve the consultation proposed timings and approach to the consultation.

The Interim Director of Public Health, Lesley Jones is appointed Joint Strategic Needs Assessment Board Champion.

The Interim Director of Public Health, Lesley Jones and the Head of Customer Services, Heather Crozier would meet to discuss the development of the Health and Wellbeing Board work programme and the development of a web platform for the Joint Strategic Needs Assessment.

**12. LOCAL ALCOHOL ACTION AREA**

Superintendent Mark Granby informed the Board that Bury partners had submitted to the Home Office an expression of interest in developing a Local Alcohol Action Area (LAAA).

The LAAA project aims to offer 15-20 areas with high alcohol-related harms help with local initiatives over a 15 month period. Projects must be in line with three key aims: tackling alcohol-related crime and disorder; reducing alcohol-related health harms; and promoting growth by establishing diverse and vibrant night-time economies.

The Home Office and Public Health England will provide advice and support to areas in formulating their action plans and reviewing progress however, no additional funding is offered as part of the support.

**Delegated Decision:**

An update with regards to the success of the Local Alcohol Action Area expression of interest, would be presented at a future meeting of the Health and Wellbeing Board.

**COUNCILLOR R SHORI**  
**Chair**

**(Note: The meeting started at 6.00 pm and ended at 7.55 pm)**