

HEALTH AND WELLBEING BOARD

MINUTES OF THE MEETING of the Health and Wellbeing Board held on Wednesday, 4 December 2013 at 9.00 am at the Executive Meeting Room - Third Floor, The Guildhall

Present

Councillor Leo Madden (in the chair)
Dr James Hogan (Vice-Chair)
Councillor Rob Wood
Councillor Sandra Stockdale

Dr Andrew Mortimore, Interim Director of Public Health & Primary Care
Tony Horne
Mark Orchard, Director of Finance
Dr Linda Collie
David Williams, Chief Executive
Julian Wooster, Strategic Director

Officers Present

Jo York, Interim Head of the Integrated Commissioning Unit
Rob Watt, Head of Adult Social Care
Dr Janet Maxwell
Matt Gummerson, Principal Strategy Adviser
Innes Richens, Chief Operating Officer

49. Welcome and introductions - (Chair) Councillor Leo Madden (AI 1)

Councillor Leo Madden, Chair of the Board, welcomed everyone to the meeting.

50. Apologies for Absence (AI 2)

Apologies for absence were received from Councillor Rob New.

51. Declarations of Members' Interests (AI 3)

There were no declarations of members' interests.

52. Minutes of the meeting held on 25 September 2013 (AI 4)

RESOLVED that the minutes of the meeting of the Health & Wellbeing Board held on 25 September 2013 be confirmed and signed by the chair as a correct record.

53. NHS Call to Action (AI 5)

(TAKE IN PRESENTATION)

Innes Richens, Chief Operating Officer, Portsmouth Clinical Commissioning Group provided a presentation to the board. He drew the board's attention to the challenges to the NHS as outlined in paragraph 2 of the briefing paper. He said that overall the measures already being implemented to meet the current productivity challenge will not be enough - a fundamentally more productive service is needed. He advised the board that the table attached to the report summarised a number of opportunities to address the challenges. Many of these are already within the CCG's commissioning plan and being implemented locally. He said that the table also gives a brief update on local delivery. Mr Richens advised that the expectation is that Health & Wellbeing Board participates in the consultation process.

The Chair of the Board thanked Mr Richens for his presentation and invited questions.

In response to questions the following matters were clarified:

- The use of social media is being looked at by the Clinical Commissioning Group and different approaches are being looked at. Discussions were taking place with Healthwatch to make use of Twitter. In addition feedback to their website was being actively encouraged. The use of social media was being promoted locally.
- As a comment under the call for action, the Chief Executive of Portsmouth City Council said that he felt that a view should be expressed during the consultation on all of the points raised and not just the points relating to local issues. For example, it may be that the expectation about the budget remaining flat should perhaps be challenged otherwise there would be a danger that silence constitutes acceptance. Mr Richens agreed with the point made and said that this was part of the purpose of the presentation.
- It was acknowledged that Adult Social Care and Healthcare needs to be better integrated in order to co-ordinate care given especially as funding is scarce. Mr Richens said that he agreed and found that work was being undertaken locally to do just that for example integration of the transformation fund was being worked on at present. In addition the city had already got an integrated care scheme.

The Chair thanked the contributors and said that this item would appear on the agenda on a regular basis.

54. Health and Social Care Partnership Stakeholder Event (AI 6)

(TAKE IN PRESENTATION)

Rob Watt and Jo York introduced the presentation on the outputs of the Health and Social Care Partnership stakeholder event held on 7 November and the next steps in agreeing the local plans for the integration and transformation fund. Rob Watt said that the key role of the Health & Wellbeing Board is to agree the plans and decide on how money is spent. There needs to be better data sharing and a joined up approach.

The presentation included the following

- Health and Social Care systems are seeing increases in demand for services and funding pressures
- There is a need to transform the way current services cope with these pressures.
- The Integration Transformation Fund (ITF) amounted to a £3.8bn pooled fund to support health and social care integration. This is not new money.
- The ITF outcomes are included on page 5 of the presentation.

Jo York said that there was a need to discover what government's thoughts are so far on the shared successes and to build on these as set out on page 9. The Vision for Health and Social Care was set out on page 10 with a recommendation to focus on empowering and enabling individuals. Jo York said that there was a need to move from repair to prevention and that early intervention was important. She said that an individual accessing the health services should only need to tell their story once. There was a need to guarantee the same care 24/7 and there should not be fluctuations depending on when a person seeks help. She said that stakeholders had given a very clear message about the need for joined up working.

The Chair thanked the contributors for their presentation and invited members of the Board to put questions. In response, the following matters were clarified:

- Clinical need should be the focus of providing care rather than issues of cost.
- There needs to be a greater focus on prevention in general.
- Consideration needs to be given on how to disinvest in order to reinvest elsewhere.

Update on Progress of Healthwatch Tony Horne gave a verbal update on the progress of Healthwatch Portsmouth seven months after it formally took up its role. Positive progress is beginning to be made following significant work. He advised that the next public meeting of Healthwatch will be on 11 December 2013 at Queen Alexandra Hospital. This follows a successful "Question Time" event in October which highlighted the need to join up patient and public involvement mechanisms. Healthwatch is leading on the development of a "Service User Charter" and would like to bring a paper to the board at a future meeting.

55. Joint Health and Well Being Strategy and Joint Strategic Needs Assessment Annual Summary 2013 (AI 7)

(TAKE IN REPORT AND PRESENTATION)

The Chair of the Health and Wellbeing Board welcomed the newly appointed Director of Public Health for Portsmouth, Janet Maxwell who was about to take up the role. The Chair then invited Dr Andrew Mortimore, the interim Director of Public Health to provide his presentation. Dr Mortimore explained that the summary version was 60 pages long but that this had been further reduced into the slides being presented at the meeting today. He said that there was a need to focus on those things which have to be improved. There were many positives, but the slides focused on matters that were particularly challenging.

RESOLVED that the Health & Wellbeing Board

- (1) agrees that the summary of key issues set out in the JSNA (Section 3.2) identifies the key challenges for improving the health and wellbeing of Portsmouth's residents;**
- (2) notes that members of the Health & Wellbeing Board have the opportunity to make more detailed contributions as part of the consultation on the JSNA which runs until the end of January 2014; and**
- (3) agrees that in principle, the scope of the Joint Health and Wellbeing Strategy should be broadened during the refresh in 2014 to cover wider issues impacting on health and wellbeing as set out in the remainder of the report.**

The Chair explained that the meeting today would be followed by a series of workshops to which members of the public had been invited to consider the breadth of issues as raised at today's meeting.

Following the workshops, feedback was provided to members of the HWB and other participants:

'Better housing, Better Health - how housing can help professionals achieve better outcomes for their residents'

- frontline staff need information about services for the whole person so they can give joined up support and advice
- a number of positive things to build on were noted, including collation and locality working
- more could be done to plan for the future e.g. home adaptations to prevent falls, getting people to think about their future housing needs.

'Communities and Health Workshop: working with communities, making the most of community assets and skills'

- need to engage people with positive hooks, not approaches that stigmatise

- need to work strategically with existing community assets, organisations and networks, and focus on where people choose to come together rather than providing new 'services' to attract them

'Making Every Contact Count (MECC)'

- staff need easily accessible and up to date information, plus training to confidently manage the response when other issues are raised outside of their professional competence.
- People support the idea of 'MECC' - the HWB can help by providing strong leadership and by developing an integrated information strategy.

A summary of the content of the workshops will be sent out with the quarterly HWB newsletter.

Cllr Madden thanked everyone for their contributions to the workshops. He noted that this will be last meeting of Portsmouth's HWB for Dr Andrew Mortimore. On behalf of the HWB, Cllr Madden thanked Andrew for stepping in to support Portsmouth alongside his work with Southampton, and for all his hard work on behalf of the city.

56. Date of the Next Scheduled Meeting (AI 8)

The date of the next scheduled formal meeting of the Health & Wellbeing Board will be held on 26 February 2014.

The meeting concluded at 11.00 am.

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Councillor Leo Madden
Chair