

## Minutes

### HEALTH AND WELLBEING BOARD

5 December 2013

Meeting held at Committee Room 6 - Civic Centre,  
High Street, Uxbridge UB8 1UW



HILLINGDON  
LONDON

	<p><b>Statutory Board Members Present:</b> Councillor Ray Puddifoot (Chairman) Councillor Philip Corthorne (Vice-Chairman) Councillor Keith Burrows Councillor Douglas Mills Dr Kuldhir Johal – Hillingdon Clinical Commissioning Group (substitute) Stephen Otter – Healthwatch Hillingdon (substitute)</p> <p><b>Statutory Board Members:</b> Tom Murphy – Statutory Director of Children’s Services (substitute) Sharon Daye – Statutory Director of Public Health Tony Zaman – Statutory Director of Adult Social Services</p> <p><b>Co-opted Members Present:</b> Jean Palmer – LBH Deputy Chief Executive and Corporate Director of Residents Services Nigel Dicker – LBH Deputy Director: Public Safety &amp; Environment Maria O’Brien – Central and North West London NHS Foundation Trust (substitute) Mike Robinson – The Hillingdon Hospitals NHS Foundation Trust (substitute) Ceri Jacob – Hillingdon Clinical Commissioning Group (Officer) (substitute) Nick Hunt – Royal Brompton and Harefield NHS Foundation Trust (substitute)</p> <p><b>LBH Officers Present:</b> Kevin Byrne, Glen Egan, Nikki Wyatt and Nikki O’Halloran</p> <p><b>LBH Councillors Present:</b> Councillors Phoday Jarjussey and John Major</p> <p><b>Press &amp; Public:</b> 1 public</p>
37.	<p><b>APOLOGIES FOR ABSENCE</b> (<i>Agenda Item 1</i>)</p> <p>Apologies for absence were received from Councillors Jonathan Bianco, Scott Seaman-Digby and David Simmonds, Mr Jeff Maslen (Mr Stephen Otter was present as his substitute), Dr Ian Goodman (Dr Kuldhir Johal was present as his substitute), Dr Tom Davies, Mr Rob Larkman (Ms Ceri Jacob was present as his substitute), Mr Shane DeGaris (Mr Mike Robinson was present as his substitute), Ms Robyn Doran (Ms Maria O’Brien was present as her substitute), Mr Bob Bell (Mr Nick Hunt was present as his substitute) and Ms Merlin Joseph (Mr Tom Murphy was present as her substitute).</p>
38.	<p><b>TO APPROVE THE MINUTES OF THE MEETING ON 31 OCTOBER 2013</b> (<i>Agenda Item 3</i>)</p> <p><b>RESOLVED:</b> That the minutes of the meeting held on 31 October 2013 be agreed</p>

	<b>as a correct record.</b>
39.	<p><b>TO CONFIRM THAT THE ITEMS OF BUSINESS MARKED PART I WILL BE CONSIDERED IN PUBLIC AND THAT THE ITEMS MARKED PART II WILL BE CONSIDERED IN PRIVATE</b> (<i>Agenda Item 4</i>)</p> <p>This was confirmed.</p>
40.	<p><b>JOINT HEALTH &amp; WELLBEING STRATEGY ACTION PLAN UPDATE 2013/2014</b> (<i>Agenda Item 5</i>)</p> <p>Consideration was given to the Joint Health and Wellbeing Strategy Action Plan performance achievements since 1 April 2013. It was noted that there had only been about a month since the last report had been produced and, as such, there had been little change. The Board was pleased to note that, in addition to the 44% of residents that no longer required ongoing care or support following re-ablement (the target was 50%), a further 12% required a reduced care package following completion of their intensive re-ablement plan.</p> <p>Concern was expressed that there were some difficulties in sharing data insofar as NHS governance prohibitions were concerned. These limitations had, on occasion, hindered the decision making process, for example, in relation to high level HIV data being available but more localised/ward based statistics being restricted. Officers were currently working to resolve this.</p> <p><b>RESOVLED: That the Health and Wellbeing Board note the report.</b></p>
41.	<p><b>PUBLIC HEALTH ACTION PLAN 2013/2014</b> (<i>Agenda Item 6</i>)</p> <p>It was noted that an exercise had been undertaken to identify projects or schemes across the Council's key service areas that would support the implementation of priorities identified in the JSNA (Joint Strategic Needs Assessment) across the four public health domains. Furthermore, the review of the work of the transferred Public Health Team had started. Consideration was now being given to finalising the revised structure, job descriptions and person specifications.</p> <p>The Board was advised that the contract for the provision of the drug and alcohol misuse service was currently being renegotiated. It was anticipated that the new contract would put a greater focus on alcohol misuse as this was more of an issue in the Borough.</p> <p><b>RESOLVED: That the Health and Wellbeing Board note the report and Action Plan.</b></p>
42.	<p><b>HILLINGDON CCG FINANCIAL RECOVERY PLAN UPDATE REPORT</b> (<i>Agenda Item 7</i>)</p> <p>A revised version of the report had been circulated to the Board. The additional information included in the report noted that the Financial Recovery Plan (FRP) formed a subset of the total CCG budgets. The report stated that, although the delivery of the FRP would contribute towards the CCG's financial position, it did not represent the final overall position. Overall, Hillingdon CCG was projecting a smaller deficit than had been set at the beginning of the financial year.</p>

It was noted that the 'actual' figures listed in the summary of progress that was appended to the report were subject to change. The Board was advised that there was often a time lag which resulted in the figures changing. For example, with regard to medicines management, there might be a significant delay between a prescription being written by the GP, the patient getting the prescription filled and the pharmacy requesting payment.

Concern was expressed that the financial information contained within the report was not clear. It was suggested that the information provided by the CCG would benefit from being presented in a general accounting format to ensure that it was easily understood.

The Board was advised that a deficit budget of approximately £12.2m and a financial savings target of £11m had been set for 2013/2014. It was anticipated that the QIPP Programme (Quality, Innovation, Productivity and Prevention) would deliver savings of approximately £9.2m towards the £11m savings target total. However, it was noted that the 2013/2014 deficit was likely to be smaller than expected at about £8m (although it was possible that this would vary through the remainder of the year).

It was noted that a move to the provision of quarterly reports (rather than monthly) would give the Board a more stable picture of the CCGs financial situation. It was suggested that subsequent reports include additional information in relation to plans for future savings to enable to Board to gain a forward perspective. To this end, Mr Mike Robinson suggested that he and Mr Jonathan Wise work with the CCG to provide an independent perspective.

**RESOLVED: That the Health and Wellbeing Board notes the update.**

43. **HEALTHWATCH HILLINGDON UPDATE** (*Agenda Item 8*)

Consideration was given to Healthwatch Hillingdon's update report and the information that was gleaned at the successful launch event. It was noted that a full report on the launch event and a completed work plan would be submitted to the Board's next meeting.

To further raise awareness of the work of Healthwatch, representatives would be attending the Older People's Assembly on 10 December 2013. It was hoped that this would contribute towards broadening engagement with (and access to) the public.

Healthwatch Hillingdon had identified areas within its remit which would require more work and was undertaking an ongoing recruitment of volunteers. It was suggested that any feedback received could be made more robust by triangulating with Patient and Public Engagement principles (PPE) and Patient Participation Groups (PPGs). It was agreed that the Council's Head of Communications would be asked to work with Healthwatch Hillingdon to include an editorial in Hillingdon People in relation to the recruitment of volunteers.

**RESOLVED: That:**

- 1. the Health and Wellbeing Board note the report; and**
- 2. the Council's Head of Communications be asked to work with Healthwatch Hillingdon to produce an editorial for inclusion in Hillingdon People.**

44. **REPORTS REFERRED FROM CABINET / POLICY OVERVIEW & SCRUTINY**

*(Agenda Item 9)*

The Board was advised that the recommendations contained within the report had stemmed from a review that had been undertaken by the Council's Children, Young People and Learning Policy Overview Committee (POC). The report had been considered and ratified by Cabinet at its meeting on 21 November 2013.

It was noted that the report set out the frustrations that had been encountered by the POC Members during the course of the review in relation to the support provided to Looked After Children (LAC). The review had identified the need to share information that was not currently being collected.

The Board acknowledged that officers were already working to address some of the issues raised in the report but that further work was needed which would require a collective buy in. It was agreed that the relevant organisations would start to collect the information as requested (although it was also noted that CAMHS did not undertake Tier 4 assessments so would not be able to provide information in relation to this area).

**RESOLVED: That:**

1. the Health and Wellbeing Board note the report;
2. the Hillingdon Clinical Commissioning Group (CCG) and Hillingdon Child and Adolescent Mental Health Services (CAMHS) acquire, maintain and share data on the following areas:
  - a. Proportion of total budgets spent on Looked After Children (LAC);
  - b. Proportion of LAC registered with a GP;
  - c. Proportion of the CAMHS caseload that is made up of LAC;
  - d. Information on what intervention / therapy is being provided by CAMHS and what health issues are being dealt with via wider case consultation; and
  - e. The number of Tier 2 and 3 assessments that CAMHS undertake for LAC.
3. officers continue to work alongside colleagues from Hillingdon CAMHS to provide a designated point of contact to provide advice and assistance for all mental health issues relating to LAC, reporting to the Health & Wellbeing Board if required;
4. officers continue to work alongside the Council's partner agencies to develop a comprehensive understanding of where responsibilities lie between NHS England and CCGs for all aspects of the health needs of LAC and report findings back to the Cabinet Member for Education & Children's Services, the Children, Young People & Learning Policy Overview Committee and the Health & Wellbeing Board as appropriate; and
5. in order to ensure that the mental health needs of LAC are met when placements are out of Borough, officers produce a protocol on the process of how services are brokered between CCGs and NHS England for agreement by the Cabinet Member for Education & Children's Services and the Health & Wellbeing Board.

45. **UPDATE - ALLOCATION OF S106 HEALTH FACILITIES CONTRIBUTIONS**

*(Agenda Item 10)*

It was noted that the time for using the s106 monies allocated to the new Yiewsley Health Centre was in danger of running out (one was due to expire in February 2014 (£10,651) and another in March 2014 (£51,118)). Although it had been suggested that

this funding be vired to the HESA Centre development in Hayes, the Board agreed that this project was too far away.

As a workable alternative, it was suggested that the s106 money could be used to process the planning application for the Yiewsley Health Centre scheme, which would cost approximately £160k. The Board agreed with this course of action and noted that NHS Property Services hoped to claim these funds back from the Council at a later date to put towards the fitting out costs.

The Board was assured that dialogue with the development at St Andrews Park was continuing, even though there had been a change of personnel involved. These discussions had resulted in the identification of potential sites for the development and meetings were planned with the developer and tenants in mid-January 2014. The CCG would ensure that progress on the development continued.

**RESOLVED: That the Health and Wellbeing Board:**

- 1. notes the progress being made towards the allocation and spend of s106 healthcare facilities contributions within the Borough; and**
- 2. agrees that officers take action to use the Yiewsley Health Centre scheme s106 funding to pay for the associated planning application.**

46. **HEALTH AND WELLBEING BOARD SUB-COMMITTEE UPDATE** (*Agenda Item 11*)

It was noted that, due to the report deadlines for this agenda, the officer group had subsequently made more progress than had been reflected in the report. An update on the Integration Transformation Fund (ITF) emerging plan would be considered at the Sub Committee's next meeting which had been scheduled for 14 January 2014.

The Board was advised that officers had now received a copy of the Department of Health submission template and were in the process of producing a draft for consideration. However, it was noted that the timetable for the completion of this template was tight: it would need to be considered by the Board at its meeting on 6 February 2014 and submitted by 15 February 2014. To enable Councillors and the CCG Board to consider the template, it was agreed that the draft would be circulated to the Board Chairman and Vice Chairman and the Hillingdon CCG Chairman and Chief Operating Officer before end of December 2013.

**RESOLVED: That:**

- 1. the Health and Wellbeing Board notes progress; and**
- 2. the draft ITF template be circulated to the Board Chairman and Vice Chairman and the Hillingdon CCG Chairman and Chief Operating Officer in advance of the Board meeting being held on 6 February 2014.**

47. **BOARD PLANNER & FUTURE AGENDA ITEMS** (*Agenda Item 12*)

Consideration was given to the Board Planner. Board members were reminded that they were able to add items to the Planner outside of the meeting.

It was agreed that, in the new municipal year, consideration could be given to the frequency that financial reports were included on the agenda. It was also agreed that the Sub-Committee update would focus on the Integration Transformation Fund plan for the next meeting.

**RESOLVED: That the Health and Wellbeing Board agrees the Board Planner, as amended.**

48.	<p><b>HILLINGDON CCG COMMISSIONING INTENTIONS 2014/2015</b> (<i>Agenda Item 13</i>)</p> <p>Consideration was given to the CCGs commissioning intentions for 2014/2015. Additional information summarising links to the Financial Recovery Plan (FRP) was circulated to Board members. It was noted that the commissioning intentions reflected the FRP and were intended to deliver financial savings through improvements in quality, outcomes and efficiency.</p> <p>The Board was advised that, although the CCG had set a deficit budget of £11.5m for 2014/2015, this figure was based on assumptions in relation to allocations made by the Department of Health. The CCG confirmed that, at present, the organisation was not permitted to carry a balance into the next financial year.</p> <p>With regard to commissioning, it was noted that the CCG used the population statistics included within the Joint Strategic Needs Assessment (JSNA). The organisation then built in a growth factor to take account of population increase.</p> <p><b>RESOLVED: That the Health and Wellbeing Board notes the Hillingdon CCG Commissioning Intentions for 2014/2015.</b></p>
	<p>The meeting, which commenced at 2.30 pm, closed at 3.05 pm.</p>

These are the minutes of the above meeting. For more information on any of the resolutions please contact Nikki O'Halloran on 01895 250472. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.