

## Minutes

### HEALTH AND WELLBEING BOARD

10 September 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 Douglas Mills Dr Ian Goodman – Hillingdon Clinical Commissioning Group Jeff Maslen – Healthwatch Hillingdon</p> <p><b>Statutory Board Members</b> Tony Zaman – Statutory Director of Adult Social Services Merlin Joseph – Statutory Director of Children’s Services Sharon Daye – Statutory Director of Public Health</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 Shane DeGaris – The Hillingdon Hospitals NHS Foundation Trust Ceri Jacob – Hillingdon Clinical Commissioning Group (Officer) Dr Tom Davies – Hillingdon Clinical Commissioning Group (Clinician) Nick Hunt – Royal Brompton and Harefield NHS Foundation Trust</p> <p><b>LBH Officers Present:</b> Kevin Byrne, Aileen Carlisle, Glen Egan and Nikki O’Halloran</p>	
13.	<p><b>APOLOGIES FOR ABSENCE</b> (<i>Agenda Item 1</i>)</p> <p>Apologies for absence were received from Councillors Jonathan Bianco, Keith Burrows, Scott Seaman-Digby and David Simmonds, Mr Robert Bell (Mr Nick Hunt was present as his substitute) and Ms Robyn Doran (Ms Maria O’Brien was present as her substitute).</p>	<b>Action by</b>
14.	<p><b>TO APPROVE THE MINUTES OF THE MEETING ON 11 JULY 2013</b> (<i>Agenda Item 3</i>)</p> <p><b>RESOLVED:</b> That the minutes of the meeting held on 11 July 2013 be agreed as a correct record.</p>	<b>Action by</b>
15.	<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><b>RESOLVED:</b> That all items of business be considered in public.</p>	<b>Action by</b>

16.	<p><b>IMPLEMENTATION OF JOINT HEALTH &amp; WELLBEING STRATEGY - ACTION PLAN 2013/2014</b> (<i>Agenda Item 5</i>)</p> <p>Consideration was given to the report in relation to the implementation of the Health and Wellbeing Strategy. It was noted that areas of activity had been detailed in the action plan and that future updates would specify where improvements had been made to the lives of residents. Effort would be made to see if this information could be further split by groups such as age, ethnicity, area, etc. Furthermore, the achievements in each priority would in future be related to the baseline so that progress could be mapped, e.g., Priority 1 - 1.1 relating the achievements to the 7,000 target.</p> <p><b>RESOLVED: That:</b></p> <ol style="list-style-type: none"> <li><b>1. the performance achievements since 1 April 2013 be noted;</b></li> <li><b>2. future updates identify where improvements had been made to the lives of residents;</b></li> <li><b>3. if possible, the data be split by categories such as age and ethnicity; and</b></li> <li><b>4. achievements be reported in relation to the baseline.</b></li> </ol>	Action by
17.	<p><b>PUBLIC HEALTH ACTION PLAN 2013/2014</b> (<i>Agenda Item 6</i>)</p> <p>Consideration was given to the report which reflected issues such as the Council's strategic approach to Public Health contracts and future service provision. Any progress made on the objectives contained within the action plan would be reported to the Board. It was noted that Hillingdon had an above average rate of hospital admissions in relation to alcohol abuse. As such, the Board welcomed the opportunity to focus on this area and officers were asked to periodically report back to the Board on progress made.</p> <p>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 across four public health domains. A large number of suggestions had been received during the exercise and these would be forwarded to the CCG for information.</p> <p>It was noted that a Business Improvement Delivery (BID) review was underway in relation to Public Health and that this process would look at new ways of working rather than just carrying forward an existing plan. As the implementation of the Health and Social Care Act 2012 had created fragmentation and provided a range of challenges, the CCG welcomed the opportunity to look at where its work could be drawn together with public health. The BID review would first look at the structure and then look at where services could be aligned.</p> <p><b>RESOLVED: That:</b></p> <ol style="list-style-type: none"> <li><b>1. the suggestions received to support the public health priorities identified in the JSNA be forwarded to the CCG; and</b></li> </ol>	Action by

	<b>2. the report and action plan be noted.</b>	
18.	<p><b>CCG RECOVERY PLAN 2013-2016 MONITORING</b> (<i>Agenda Item 7</i>)</p> <p>The CCG was thanked for providing its financial update report in a format that was more in-keeping with those produced by the Council. With regard to the period that the report covered (April to May 2013), it was noted that the speed of data flow through the NHS was causing a time lag of 2-3 months. As such, the figures were as up to date as was possible at the time the agenda was published. Validated figures for June 2013 had been returned to the CCG on 9 September 2013 and were broadly in line with the previous two months' performance. It was noted that the figures for 2013 were more positive than those for 2012.</p> <p>The data validation time lag could potentially result in the CCG having an inaccurate picture of its current financial situation (until at least two months after the fact) and issues would eventually arise in relation to payments being made too slowly to service providers that had been commissioned. The CCG anticipated that it would eventually be able to produce monthly validated figures. Future update reports to the Board would include information in relation to unexpected set backs.</p> <p>The Board was advised that the Financial Recovery Plan (mentioned in paragraph 3.2 of the report) was described as a refreshed version as it incorporated new financial instructions and new schemes that had been worked up since the Plan was first published.</p> <p>There had been a culture in the NHS of a lack of investment in IT infrastructure and a history of poor project management for IT systems. The CCG would be looking to implement an improved system by 2014.</p> <p><b>RESOLVED: That the update on the CCG's Financial Recovery Plan 2013/14 be noted.</b></p>	<b>Action by</b>
19.	<p><b>UPDATE: ALLOCATION OF S106 HEALTH FACILITIES CONTRIBUTIONS</b> (<i>Agenda Item 8</i>)</p> <p>It was noted that all of the S106 agreements detailed in the report were time limited and that some of them would soon reach their expiry date. The Board was keen to ensure that the expiry dates were not reached without having spent the money. As the process of approval through the NHS was quite long winded, effort would be made to draw up the agreements in such a way that the money could be dealt with locally.</p> <p>Consideration was given to the RAF Eastcote S106 which would be available for another year. Investigations would need to be undertaken to determine whether the £186k could be linked to a project such as improvements at Mount Vernon Hospital. Officers were working hard to resolve the issue of using S106 money and the CCG welcomed suggestions that would offer increased flexibility.</p> <p>From the CCG perspective, NHS Property Services was responsible for the S106 process and the allocation of funding. Some delays in the NHS processes had arisen as a result of location/proximity of the</p>	<b>Action by</b>

	<p>proposals in relation to the expanding population.</p> <p>It was suggested that developers were often happy to look at revising / amending the original S106 agreement if asked. Ms Jacob would ask NHS Property Services to speak to those developers where this would be advantageous. The Council's Deputy Chief Executive and Corporate Director of Residents Services would also ensure that, where S106s were coming close to their expiry date, developers were contacted to see if there could be some renegotiation of the agreement or an extension.</p> <p><b>RESOLVED: That:</b></p> <ol style="list-style-type: none"> <li><b>1. the Board notes the progress being made towards the allocation and spend of S106 healthcare facilities contributions within the Borough; and</b></li> <li><b>2. Council's Deputy Chief Executive and Corporate Director of Residents Services would ensure that developers were contacted in relation to S106s that were coming close to their expiry date to renegotiate the agreement or agree an extension.</b></li> </ol>	
20.	<p><b>YIEWSLEY HEALTH CENTRE UPDATE</b> (<i>Agenda Item 9</i>)</p> <p>The Board was updated on progress with regard to the Yiewsley Health Centre. The CCG advised that the revenue costs for GPs were currently being reviewed and should be resolved in the next few days. Capital costs were also being queried but it was anticipated that these would also be resolved shortly.</p> <p>It was noted that the Council was keen to ensure that progress was made in relation to the Yiewsley Health Centre as a matter of urgency. The Chairman advised that the Council would be happy to write to the Secretary of State if that would help speed things through the NHS England approval processes. The CCG Chief Operating Officer would report back on progress by the end of the week.</p> <p><b>RESOLVED: That;</b></p> <ol style="list-style-type: none"> <li><b>1. the CCG Chief Operating Officer report back on progress with regard to NHS England approval in relation to the Yiewsley Health Centre; and</b></li> <li><b>2. the update be noted.</b></li> </ol>	<b>Action by</b>
21.	<p><b>S256 AGREEMENT - FUNDING TRANSFER FROM NHS TO LBH</b> (<i>Agenda Item 10</i>)</p> <p>Consideration was given to the S256 agreement report. It was noted that the Council had invoiced for the first funding instalment but, as the money had not yet been received, officers would be pursuing the matter. Concern was expressed that the delay was being caused by NHS England processes.</p> <p><b>RESOLVED: That the Board:</b></p> <ol style="list-style-type: none"> <li><b>1. noted that the S256 funding agreement was reviewed by the Shadow Health and Wellbeing Board on 19 February 2013</b></li> </ol>	<b>Action by</b>

	<p>and then signed off on 30 May 2013 by the Corporate Director of Social Care &amp; Health and the Chief Operating Officer of the Hillingdon Clinical Commissioning Group (HCCG); and</p> <p>2. agreed the direction of travel set out within the S256 agreement at Appendix 1 of the report.</p>	
22.	<p><b>DEVELOPMENT OF A MEMORANDUM OF UNDERSTANDING BETWEEN CCG &amp; LBH</b> (<i>Agenda Item 11</i>)</p> <p>Consideration was given to the memorandum of understanding (MoU) between Hillingdon CCG and the Council. It was noted that the MoU would be effective until March 2014 whereupon it would be reviewed annually.</p> <p><b>RESOLVED: The Board agree the draft Memorandum of Understanding.</b></p>	Action by
23.	<p><b>BOARD PLANNER &amp; FUTURE AGENDA ITEMS</b> (<i>Agenda Item 12</i>)</p> <p>Consideration was given to the Board Planner and future agenda items.</p> <p>At the last Board meeting, it was agreed that a Sub-Committee be set up to look at the integration of health and social care. This Sub-Committee had held its first meeting on 27 August 2013. It was anticipated that the work of the Sub-Committee would go beyond what it was statutorily required to do and would redesign business processes based on user needs and demands.</p> <p>The Board was advised that the Council would be providing the funding for developing integrated health and social care. It was agreed that an update report from the Sub-Committee would be added as a standard item to each agenda and that the Board receive an update on the Joint Strategic Needs Assessment (JSNA) at its meeting on 31 October 2013.</p> <p>Members of the Board were encouraged to add new items to the Board Planner as and when the need arose.</p> <p><b>RESOLVED: That:</b></p> <ol style="list-style-type: none"> <li>1. the Board receive an update report from the Sub-Committee as a standard item at each of its meetings;</li> <li>2. a JSNA update report be considered at the meeting on 31 October 2013; and</li> <li>3. the amended Board Planner be agreed.</li> </ol>	Action by
<p>The meeting, which commenced at 2.30 pm, closed at 3.15 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.