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Contact Officer: Jenny Bryce-Chan

KIRKLEES COUNCIL

HEALTH AND WELLBEING BOARD

Thursday 28th April 2016

Present:

Councillor Donna Bellamy
Kiran Bali
Carol McKenna
Richard Parry
Rachel Spencer-Henshall
Sarah Callaghan

Apologies:

Councillor Viv Kendrick (Chair)
Councillor Jean Calvert
Councillor Erin Hill
Councillor Kath Pinnock
Rory Deighton
Dr David Kelly
Dr Steve Ollerton

In attendance:

Observers:

117 Appointment of Chair

Councillor Donna Bellamy was appointed chair of the meeting.

118 Membership of the Board/Apologies

The Board noted the following substitutions:

Fatima Khan-Shah for Rory Deighton
Dr Nadeem Ghafoor for Dr David Kelly
Catherine Riley for Owen Williams
Karen Taylor for Alex Farrell
Matt England for Michael Barkley

Apologies for absence were received from: Cllr Viv Kendrick, Cllr Jean Calvert, Cllr Erin Hill, Cllr Kath Pinnock, Dr David Kelly, Dr Steve Ollerton, Rory Deighton and Chief Superintendent Steve Cotter.

119 Minutes of previous meeting

RESOLVED – That the minutes of the meeting held on the 31 March 2016 be agreed as a correct record.

120 Interests

No interests were declared.

121 Admission of the Public

All agenda items were considered in public session.

122 Deputations/Petitions

No deputations or petitions were received.

123 Primary Care Strategy

Jan Giles and Jackie Holdich attended the meeting to present the Primary Care Strategies for Greater Huddersfield CCG and North Kirklees CCG.

The Board was advised that the strategies affects Kirklees residents as a whole and the overall vision for healthcare is that it is high quality supportive, proactive accessible to all and delivered in a safe and cost effect way. The vision has been developed in conjunction with a number of other strategies and NHS England published its forward view nationally and Kirklees is in line with the national picture.

The Board was informed that the process for developing the strategies had included extensive engagement with patients, representative patient bodies, public, partners, stakeholders, GP's and clinical leaders to focus on what is necessary, realistic and achievable.

The key outcomes are that healthcare offers seamless, integrated care to all patients which focuses on access, quality, workforce, premises and infrastructure and funding and contracting. Working groups have been established with project plans and the governance structures are in place for reporting purposes.

The Board was advised that forward planning is important because of the aging workforce and work is being done to look at a different workforce with different and more flexible ways of working for general practice.

The Board commented that it is important for the Health and Wellbeing Board take a lead role in developing a collaborative workforce strategy across both health and social care that ensures the appropriate workforce for the future.

RESOLVED - That receipt of the Primary Care Strategies for Greater Huddersfield and North Kirklees CCG's be noted by the Board.

124 Care Home Strategy

Phil Longworth presented the Care Home Strategy, advising the Board that the strategy had been jointly developed between Kirklees Council, North Kirklees and Greater Huddersfield CCGs. The strategy outlines the shared approach that partner organisations will take with regard to the ongoing development of care homes for older people in Kirklees.

The Board was informed that the strategy highlights issues that need to be addressed such as the difficulty recruiting and retaining of care workers and managers. The workforce challenge in the care home sector is significant therefore the actions to address this must be a major element of the delivery plan.

Developing a suitably skilled workforce will require consideration being given to professional development for managers and continuing development of care home staff.

The Board was informed that the strategy aims to ensure that the people living in care homes have a positive experience and to ensure that all homes are:

- 1) A good place to live
- 2) An effective part of a wider system that supports older people
- 3) A successful business

The Board discussed the need to develop a 'place based' view of health and social care services, including how the care homes in an area link with the primary care services. Given the importance of care homes to the sustainability of the health and social care system it is important to be clear about who is driving the strategy on behalf of the partners and how it can be driven at pace. Work still needs to be done on how to measure the outcomes of the strategy using a set of indicators for Kirklees

The Board commented that it was keen to support discussions with the CQC about the system level risks that result from inspections.

RESOLVED -

- (a) That the content of the Strategy be noted.
- (b) That the Strategy be endorsed by all partners.
- (c) That all partners consider their roles in delivering the action plan within the Strategy.

125 Sustainability Transformation Plan update

Rachel Millson attended the meeting to provide a progress update on the Sustainability and Transformation Plan (STP). The Board was advised that there had been a discussion at Chief Officers Group with regard to the checklist requirements and what should be included in the plan. Carol McKenna has been identified as the Senior Responsible Officer for overseeing the development of the local plan.

The Board was informed that the month of April was used for collecting information in response to the guidelines received so far and deciding what will need to be in the STP based on 10 big questions that need to be adequately addressed. The requirements from NHS England are very prescriptive and further guidance and direction from NHS England is awaited. At this stage it is not clear if there will be a template for submitting the information on.

The first checkpoint submission was made on the 15 April 2016, and will give an indication of thinking in readiness for preparing the STP which needs to be completed and submitted on the 30 June 2016. The intention is to have a draft prepared by the end of May.

The Board was informed that work had been done to try and identify the challenges and workforce is definitely a challenge however the STP provides an opportunity to

come up with a workforce plan. NHS England will be looking at the STP having a workforce plan as it is a national issue.

Work has been undertaken to introduce the STP as a concept to GP community in North Kirklees and also to develop a communication and engagement plan and engagement will not cease once the plan has been submitted. There is still more work that needs to be done however much progress has been made.

The Board was advised that areas that still need to be considered are the 3 gaps and there has been some discussion about how to address the funding and efficiency gap and this discussion will be opened up. It will be important to consider how to understand the collective financial position and what the system pressure looks like and coming to a financial truth. Currently transformation streams have money attached with money coming through STP therefore it is also important to identify areas of commonality.

Work is progressing across West Yorkshire by the Healthy Futures PMO. Workshops have been held across the 4 priority areas to discuss opportunities for joint working and agree the underpinning programmes and timescales.

A number of different organisations have come forward to support the development of the STP and are working through how best to access and utilise this. Public Health England have produced a 'state of the region' report which is currently with Kirklees Public Health for local interpretation and consideration in the STP development process. This work will link to the refresh of the Joint Strategic Assessment.

RESOLVED - That the update on the STP be received and noted by the Board.

126 Integrated Front Door Proposal (Multi-Agency Safeguarding Hub)

Trish Berry attended the meeting to advise the Board on the proposals to remodel the Multi-Agency Safeguarding Hub (MASH). The Board was informed that the MASH has been in place in Kirklees, since 2015 and consists of co-located professionals from health, education, police and children's social care.

Recent audit work had identified the need to strengthen the offer at the front door as the Kirklees offer is limited. Proposals to strengthen the MASH will include links to a larger network of agencies to improve information sharing and it has been difficult to deploy staff to deal with issues as there has not been the breath of agencies involved. There are financial benefits to having the right agencies at the front door. Improvements to the MASH will also include:

- An additional detective sergeant at the front door
- Early help at the front door for families to stop cases escalating and to have the key people to deal with cases of child Sexual Exploitation, Keeping children safe
- Record and information sharing agreement currently in place extended to cover new agencies that come into the MASH
- Seamless approach to MASH will include technology

The Council will look to accommodate the MASH.

RESOLVED - That the suggested model for the Multi-Agency Safeguarding Hub be agreed.

127 Transforming Care Partnership Plan

Kelly Glover attended the meeting to present the draft Transforming Care Partnership Plan. The Board was advised that Calderdale, Kirklees, Wakefield and Barnsley (CKWB) had worked collaboratively to develop a programme that will transform community infrastructures and reshape services for people with a learning disability and or autism. NHS England requires that the plan is co-produced.

The Board was informed that the CKWB region was rated 6th highest for CCG commissioned in-patient beds and although work has been ongoing to reduce the numbers, the region is still well over the national planning assumptions for in-patient beds.

The plan is continually being developed and the final submission to NHS England will be on the 1 July 2016 with checkpoints on the 20 May and 24 June. NHS England have set an assessment framework.

The plan will be further developed with key stakeholders to ensure true co-production and an engagement event had been planned for the 25 May.

RESOLVED -

(a) That the plan be received and noted

(b) That the Board endorses and supports the Transformation Care Partnership Plan

128 Special Educational Needs and Disability Ofsted Inspections

Mandy Cameron, Deputy Assistant Director, Learning and Skills advised the Board that from the 1 May 2016 Ofsted will begin their timetable to carry out an area Special Education Needs and Disability (SEND) inspection. Every area will be subject to an inspection within the next 5 years.

The Board was informed that the framework for the inspection had only just been released however early guidance suggests that a wide range of information will be used in the evaluation process alongside methods to gather the views of identified children and young people, parents and carers, leaders with the local area and providers. In Kirklees there are 5000 Special Education Needs and 1800 Education Health Care Plans.

The inspection will be far reaching and will look at the Joint Strategic Needs Assessment outcomes, Joint Health and Wellbeing Strategy, performance data published by the Department for Education and Department of Health, Healthy Child Programme, School Nursing Service, health services pathways, neonatal screening programme and the CAMHS Transformation plan. The fieldwork will include discussions with elected members, key local area officers from health, education

and social care. Initial discussions will take place with the DCS and the Chief Executive of the CCGs.

The inspection team which will include an HMI (lead) a CQC inspector and a Local Authority inspector will ring up 5 days prior to the start of the inspection, which will last 5 days or longer depending on the complexity and will focus on:

- An evaluation of how effectively the local area identifies disabled children and young people and those who have special educational needs.
- An evaluation of how effectively the local area meets the needs and improves the outcomes of disabled children and young people and those who have special educational needs.

The inspection will only be carried out in term time and will speak to the people identified. The team will be checking to see if the provision is adequate to meet need. Briefings have stressed that inspectors will be checking whether the area provides for disabled CYP to the detriment of those with SEN.

In order for Kirklees to respond to the inspection, all key partners must understand what will be required of them during this process and a series of briefings will be organised, with invitations for key officers.

With regard to the judgement criteria there is no grade. The Council will receive a narrative outlining strengths and weaknesses. There may be a requirement to draw up an action plan, and this would lead to further, ongoing contact with inspectors.

RESOLVED - That Members of the Board share the information with their respective organisations and prepare themselves for the inspection.

129 Health and Wellbeing Board Terms of Reference

Phil Longworth informed the Board that the proposed revision to the terms of reference for the Health and Wellbeing Board was an outcome of the Board's development session in September 2015. One of the outputs from the session was that the Board would clarify and improve understanding of its role and purpose.

The Board was advised that the proposed revisions were intended to reflect the outputs from the session and the Board was asked to consider and agree the revisions.

RESOLVED - That the revisions to the terms of reference be agreed by the Board.

130 North Kirklees Clinical Commissioning Group Operational Plan

The Board considered the North Kirklees Operational Plan.

RESOLVED - That the Plan be received and noted by the Board.

131 Minutes of CSE & Safeguarding Member Panel

The Board considered the minutes of the Child Sexual Exploitation and Safeguarding Panel held on the 3 March 2016.

RESOLVED - That the Minutes be received and noted by the Board.

- 132** **Date of next meeting**
RESOLVED - That the date of the next meeting be noted.

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