

Contact Officer: Jenny Bryce-Chan

KIRKLEES COUNCIL

HEALTH AND WELLBEING BOARD

Thursday 30th March 2017

- Present: Councillor Viv Kendrick (Chair)
Councillor Donna Bellamy
Councillor Shabir Pandor
Councillor Erin Hill
Rory Deighton
Dr David Kelly
Carol McKenna
Richard Parry
Fatima Khan-Shah
- Apologies: Councillor Kath Pinnock
Dr Steve Ollerton
Priscilla McGuire
Gill Ellis
Kathryn Hilliam
Jacqui Gedman
- In attendance: Helen Bewsher – Senior Manager Public Health
Intelligence
Sue Richards – Assistant Director for Early Intervention
and Prevention
Phil Longworth – Health Policy Officer
Jenny Bryce-Chan – Governance Officer
- Observers: Lorna Peacock - Locala
Catherine Riley – CHFT
Karen Taylor – SWYFT
Matt England – Mid Yorks
DCI Mick Brown –West Yorkshire Police

80 Membership of the Board/Apologies

Apologies from Cllr Kath Pinnock, Gill Ellis, Dr Steve Ollerton, Priscilla McGuire, Jacqui Gedman and Kathryn Hilliam.

Rory O'Connor substituted for Rachel Spencer-Henshall.

81 Minutes of previous meeting

RESOLVED - That the minutes of 2 March 2017 be approved as a correct record.

82 Interests

Fatima Khan-Shah as a Director of Investors in Carers in respect of agenda item 10.

Richard Parry declared an 'other' interest in respect of agenda item 10.

83 Admission of the Public

That all agenda items be considered in public session.

84 Deputations/Petitions

No deputations or petitions received.

85 Public Question Time

No questions were asked.

86 Kirklees Joint Strategic Assessment Update

The Board welcomed Helen Bewsher, Senior Manager Public Health Intelligence to the meeting and invited her to provide an update on the Kirklees Joint Strategic Assessment. The Board was reminded that in February 2015, it had endorsed a new approach to the KJSA's development and, since then there had been timely progress updates to the Board on the development of a new KJSA website which is now live.

The new format of the KJSA makes use of infographics in an attempt to move away from an overly narrative content. While the intention is to update the overview and all the supporting content on a two yearly basis the detail will be updated as and when issues arise and; wherever possible the data will be the latest available locally. The Board questioned whether the information on the website which shows the whole of Kirklees could be broken down to make it more asset based.

The Board was advised that each section of the KJSA follows a consistent approach which includes headlines, why the issue is important and where the issue is causing the greatest concern. It is not meant to be an exhaustive list however it does include links to other resources and signposts to more detailed pieces of work.

The Board was informed that the 'what's next' section gives an overview of the key challenges for the district and this information is updated annually. Sections will be

updated using CLIK (Current Living in Kirklees) data and also forthcoming will be the KJSA indicator tables which provide Kirklees level data for a variety of key indicators.

A new blog is being promoted and the intention is that there will be new information on it every month. There is also an opportunity for partners to use it to promote issues and information.

RESOLVED –

(a) that the Board endorses and supports the continued development of a KJSA that drives local commissioning for health and well-being outcomes

(b) that Carol McKenna and Richard Parry will speak to CCG colleagues to nominate members to join the working group

(c) that the Board will continue to receive regular updates

87 Health and Social Care Decision Making in Kirklees

Phil Longworth, Health Policy Officer advised the Board that the recent Peer Challenge process had highlighted the need to have leadership and governance arrangements in place that will drive change in the future. The initial feedback from the review process contained a series of recommendations which included:-

- Political, clinical and management leadership working together
- A single system working to enable things to be done once and better, with a single commissioning voice

There was also a specific recommendation to simplify and strengthen the governance and approval framework.

The Board was directed to appendix 1 of the appended report which showed the current decision making landscape and reminded that it had previously discussed examples of reports that were presented to multiple boards and meetings. The Board was advised that the current landscape had evolved over the last few years and had led to a system that was complex and time consuming to navigate and resource. The Board had previously agreed to test out decision making as a simple system on the Healthy Child Programme.

The Board was further advised that:-

- There had been discussions with the CCG's to consider the footprint of decision making.
- The 'Talk Health' campaign is coming together.

- The Council had established the Kirklees Democracy Commission to look at how the Council can create a stronger local democracy. The draft report detailing the findings of the Democracy Commission will be completed shortly and presented to Full Council. This work might highlight how the Health and Wellbeing Board and partner organisations should operate.

The Board questioned when members could have sight of the Commission's report and was advised that once complete board members will be sent a link to the report.

The Board was informed that the next steps was to review the current decision making systems looking at what decisions needs to be taken and what mechanisms should to be in place.

The Board was informed that the Peer Challenge had clearly identified that a more robust management of programme priorities needed to be in place and in response the Board agreed that a timeline and detailed programme should be compiled and to understand what committees were going to be formed.

The Board also felt that partners would need to consider what they would be comfortable delegating to these committees. Part of this process would require being clear about what is meant by decision and to understand the scheme of delegation of each organisation as some decisions require further consideration for example by CCG governing bodies.

RESOLVED –

(a) that the Board will receive an action plan from the peer review

(b) that the meeting in April will consider in more detail the outcome of the peer review

88 Health & Social Care Integration in Kirklees

Phil Longworth, Health Policy Officer advised that following the Peer Challenge a report will be issued on Monday 3 April which will outline the key messages and findings of the review.

The Board was informed that a 'peer challenge' involves a collection of people who have knowledge relevant to a subject for example health and social care who come in and investigate. The review is designed to help an authority and its partners assess current achievements, areas for development and capacity to change. The review is not an inspection but instead offers a supportive approach, undertaken by 'critical friends'. Kirklees was part of a pilot and was asked to give feedback on the review process.

The Board was informed that the review team interviewed 35 senior people from across the health and social care system as well as reviewing a wide range of

documents between the 8th and 10th March 2017. At the end of the three days the team presented their findings and recommendations to all those who had been interviewed. Work is now being undertaken to develop an action plan which responds to each of the recommendations.

The Board was informed that the Council and the CCG's are continuing to progress the integration of commissioning across Kirklees. There was however a concern raised about how this can happen without primary care involvement.

The Board discussed the proposed arrangements for overseeing the integration of out of hospital care service delivery. The proposed approach involved the Council, Locala, South West Yorkshire Trust and Kirklees Neighbourhood Housing. The Board also discussed the importance of engaging primary care, but recognised that the Peer Challenge findings had highlighted the issue of the sustainability of the current models of primary care, and that the need to develop a modern model of primary care was critical. The Board suggested involving representatives of GP practices that are introducing new models of primary care.

The Health and Wellbeing Board supported the proposal for the service delivery integration board which would report to the Board, and to see future reports highlighting practical examples of how the system is working. The Board however agreed that the service delivery integration board needs to be reviewed including revising the Terms of Reference, membership and change the name to reflect the points raised by the Board.

RESOLVED –

- (a) that the terms of reference be reviewed and revised and sent to Board Members
- (b) that the name of the Integration Board be changed – removing the word Board from the title.

89 Kirklees Better Care Fund

Phil Longworth, Health Policy Officer informed the Board that the Better Care Fund (BCF) 2017/18 is scheduled to come to the Board however guidance is still being awaited. The guidance and policy framework has been delayed and there is still no definite date for publication.

The Board was informed that the Quarter 3 performance against the national metrics shows there are clearly areas of concern, most notably Non Elective Admissions, Achieving Independence for Older People and Dementia Diagnosis. The BCF Programme Board is continuing to monitor performance and work with relevant partners to improve performance.

The BCF Partnership Board has been developing the 2017/18- 2018/19 plan and is proposing to reshape the schemes funded through the BCF. The proposals aim to

Health and Wellbeing Board - 30 March 2017

extend the scope to include a greater proportion of the total current spend included in the pooled budget (aiming for 100%) wherever possible in the following areas:-

- Intermediate care and reablement
- Kirklees Integrated Equipment Service,
- Accessible Homes (Disabled Facilities Grant)
- Handyperson Scheme
- Assistive Technology
- Carers support
- Support for adult social care
- Mental health voluntary sector contracts
- Support to the voluntary and community sector

The Board was informed that the intention is to also include a range of areas not previously in the BCF. The first of these will be Continuing Care, but not the entirety of spend across partners in this coming year. Further areas planned to be included in the next phase are Frailty, Learning Disability and Implementing the Care Homes Strategy.

The government has announced an increase to the funds available through the BCF. The primary purpose of the funds is to ease the pressure on social care.

The Board was advised that senior officers from adult social care and the Clinical Commissioning Groups are meeting to develop proposals about how best to utilise this allocation in light of government expectations and existing finance and activity pressures. This will be presented to Cabinet and Full Council for approval in the coming weeks.

RESOLVED –

(a) that the Board notes the progress with implementing the 2016/17 plan and the performance challenges.

(b) that the Board endorses the proposals for reshaping the BCF for 2017/18 and 2018/19

(c) that the Board notes the national announcements and the requirement that the Board will have to approve the 2017/18 BCF plan prior to submission.

90 Date of next meeting

To note the next meeting of the Health and Wellbeing Board will be on Thursday 27 April 2017 – Reception Room Huddersfield Town Hall.

RESOLVED - That the date of the next meeting be noted by the Board.