

Sandwell Health and Wellbeing Board

Monday 29th March

4:30 - 6:30pm

Room 2F, Kingston House

Minutes

Present:

Richard Nugent (Chair), Chair Sandwell PCT
 Rob Bacon, Chief Executive, Sandwell PCT
 Surrinder Bains, Performance Management Lead, Sandwell Partnership
 Alison Barrett, Scrutiny Manager, Sandwell MBC
 Janine Brown, Director of Partnerships, Children and Young People's Trust
 Susan Davis, Chair, Sandwell & West Birmingham Hospitals NHS Trust
 Karen Dowman, Chief Executive, Sandwell Mental Health Foundation Trust
 Pam Jones, Chair of Sandwell Local Involvement Network
 Mark Triggs, Interim Strategic Engagement Manager, SCVO
 Ian Walton, Chair of PCT Professional Executive Committee
 Andy Williams, Director of Commissioning, Sandwell PCT

In attendance:

Lynn Jackson, Joint Planning and Policy Manager (item 4)
 Ann-Marie McElhone (minutes), Health and Wellbeing Unit
 Hope Ojukwu, Health Development Manager (item 3.1)
 Paul Southon, Public Health Development Manager (item 3.1)
 Gary Stevens, Audit Commission, CAA Lead (observer)
 Richard Young, Head of Commissioning Strategy, Sandwell PCT (item 2c)

1.	<p>Introductions and Apologies</p> <p>Richard Nugent welcomed Mark Triggs, Interim Strategic Engagement Manager from SCVO and Gary Stevens to the meeting.</p> <p>Apologies were received from John Adler, Alan Dean, Glynn Dixon, Keith Heyes, Cllr Linda Horton, Cllr Ian Jones, John Middleton, Andrea Pope-Smith, Janette Rawlinson, Nigel Smith, Shane Ward, Paul Wright and Tony Zaman. It was noted that Cllr Derek Rowley had a prior meeting and hoped to join the meeting at a later stage.</p> <p>It was noted that this meeting was not quorate.</p>
2.	<p>Minutes and Matters arising</p> <p>a) Previous meeting minutes - 22nd February</p> <p>The Board: Agreed the minutes as a true reflection of proceedings.</p> <p>Richard Nugent referred to the top of page 2 and discussions held around infant mortality. He asked if the figure of 20 infant deaths had been clarified. Lynn Jackson responded that the 2009 figure for infant deaths was 29.</p>

	<p>b) Action Log Lynn Jackson referred to enclosure 1a, and spoke about the actions relating to the Anti-poverty Strategy and the Housing and Health Strategy. The initial draft of both strategies came to the Board previously. The Board should decide if they would like to see these back to a future meeting.</p> <p>Richard Nugent felt that these strategies could be something to be picked up under the Thematic workplan.</p> <p>c) End of Life Care - Progress update and feedback from feasibility exercise on proposals for new development Richard Nugent indicated that there was no report for this item. Richard Young was in attendance to update the Board and began by saying that Jatinder Kaur who had been pulling this report together was on sick leave.</p> <p>Richard Young went on to offer a verbal update around end of life care by saying that the PCT Board had approved a process some time ago to agree a strategic partner for End of Life Care. It is now proposed that we go out to tender for a feasibility exercise in this regard. Jatinder and other colleagues have been holding meetings with interested parties. Richard Young informed members that they hoped to go out to formal tender after April and hoped to enter into a contract in six months time. He reassured members that a full report can come back to the Board in this regard.</p> <p>Richard Nugent expressed how important it was to progress this piece of work. Richard Young left the meeting at this stage.</p> <p>The Board: Agreed for a detailed report on End of Life Care feasibility exercise comes back to a future meeting.</p>
	<p>Development Issues / Strategic Priorities</p>
<p>3.</p>	<p>Health Inequalities</p> <p>3.1 Progress report on Health Inequalities</p> <p>- NST Action Plan Hope Ojukwu was in attendance to present her report circulated to members as enclosure 2, prior the meeting. Hope indicated that her report focused more on updating members on Alan Dean's previous report around NST support arrangements and the toolkit. Hope added that they are in the process of updating the action plan currently and more information can come back on this to a future meeting.</p> <p>The NST had made some recommendations from their visit linked to meeting 2010 targets. As a result the NST Action Plan was produced. The NST came back for a follow up meeting and they in turn offered further support arrangements to the PCT. A series of national Masterclasses were set up in relation to priority areas, and various members of staff attended.</p>

A regional event took place following these masterclasses, at which the toolkit was launched. This is a comprehensive toolkit which Sandwell has signed up to. Hope has a copy of this toolkit which she can forward to anyone who would like to see it. The next stage is to address the actions in the action plan and develop these further.

Richard Nugent asked what was the practical benefit of the toolkit? Hope responded that the toolkit sets out some actions which aim to guide us, and shows us in the direction of support.

- Report to Auditors and Government Office

Paul Southon was in attendance to present this item. He began by saying that the report produced as enclosure 3, has a number of purposes and links back to the toolkit which Hope has talked about. Paul referred to Sandwell's background with regards to Health Inequalities and the work that needs to be done to reduce health inequalities.

The key to making all this happen is partnership working. He then moved on to talk about tackling the wider determinants such as reducing poverty, worklessness and welfare rights (page 6-9). He added that there is still more development work needed. The next stage is tackling particular health issues. There has been a lot of drive from the NST in relation to the 2010 charter. This is where the lifestyle services play an important role and the outcome of lifestyle services review has provided some recommendations on how these could work better.

The re-design of the smoking cessation services has taken place and this will provide a more flexible system, which we hope will help us tackle the challenge of reducing smoking.

Richard Wilson's team in Public Health is progressing work around the modelling of the potential impact of lifestyle services using weight management, smoking and physical activity. It was concluded from this piece of work that there is clearly a role for lifestyle services in reducing the risk of CVD.

Richard Nugent commented that Paul's report pulled all the information together very well. Gary Stevens agreed with this.

Rob Bacon also agreed that this was a helpful report and found the graphs included in the appendices useful, he added that trends in recent quarters have been good, in particular coronary heart disease. Rob went on to query with regards to infant mortality, appendix 4. He said he found it interesting that whilst the number of infant deaths was coming down, future projections showed an upward trend. Paul Southon responded that he had spoke to Jenny Chen and Richard Wilson about the data. It is his understanding that there has been a number of multiple birth deaths and this sharply increases what are usually not so high numbers.

Janine Brown spoke about obesity impacting on this. There is work going on around nutrition and smoking in pregnancy.

	<p>Paul Southon said that this was a complex issue. He suggested that he goes back to Richard Wilson's team for clarification on figures. He confirmed to members that the data was a monthly update on a 3 year rolling average.</p> <p>Sue Davis took the opportunity to speak about genetic disorders that are more common which may impact on this. Ian Walton sought clarification on what Paul meant by multiple birth deaths. Paul used the example of twins, where as rather than one birth death, this is counted as two. Richard Nugent acknowledged that this issue has been picked up and all our strategies are aligned to include this.</p> <p>Rob Bacon felt it would have been good to have 'married' this report with the Wold Class Commissioning (WCC) plan. Paul Southon agreed that including WCC objectives in this report would be helpful.</p> <p>Mary Fairfield informed members about a forthcoming NST visit on infant mortality.</p> <p>Rob Bacon reiterated that we needed to get the numbers into this report as we do have plans in place to support the metrics.</p> <p>The Board Noted progress made in progressing NST plans and endorsed report to Auditors and Government Office subject to building in PCT targets</p>
4.	<p>Final Thematic Partnership Plan - for sign off - proposed future work plan</p> <p>Lynn Jackson advised that an initial draft of this plan came to the Board in February and the final plan is due for submission at the end of March.</p> <p>It was suggested at the last meeting that more focus was included on obesity and reference made to Right Care, Right Here Programme. Lynn has made the amendments suggested and updated other remaining items, following the Local Strategic Partnership's (LSP) structure for this plan.</p> <p>On speaking of the changes made, Lynn referred to the introduction which focuses on 7 priorities, one of which is obesity. A brief overview on Right Care, Right Here, PCT World Class Commissioning and Adult Social Care Modernisation and Transformation was included in section 1.3.</p> <p>Moving on Lynn spoke about section 4.1, meeting key performance targets and how it is proposed that a wider approach will be taken on performance reporting where LAA reward indicators / stretch targets end in 09/10. The LAA Supporting Independence group are already taking this wider approach. Lynn wanted to ensure that the Board were happy with this. It was noted that there were no objections to this.</p> <p>Speaking about section 5.3, resource allocation, Lynn advised that this section has not yet been updated. The line taken on the current plan is to look at additionality and not mainstream resources.</p>

	<p>Lynn referred to the current work taking place with the LAA delivery plan refresh and associated risk documents for 2010/11. Once this work has been completed they will be submitted as supporting documents to the Thematic Plan.</p> <p>Lynn came to a close by asking members if they had any further suggestions with regards to the content of the plan.</p> <p>Richard Nugent asked Gary Stevens if he had any thoughts about the plan. Gary indicated that the plan pretty much covers everything that the Audit Commission has reported on. What he didn't see was the planned outcomes for the 7 priorities set out. Rob Bacon linked the outcomes to section 5, but again he stated that it would be useful to have included the agreed PCT targets around this.</p> <p>Lynn Jackson referred to a piece of work taking place in the Local Authority, where the Thematic boards have been mapping their contribution to ISP shared priority actions and joint work with other themes. The aim is for all this information to be captured on the MBC Performance Plus system. Supporting Independence information on there too.</p> <p>Rob Bacon asked if there was sufficient reference regarding work within Primary Care. Lynn recognised that this was a gap. She agreed to make the final changes to this plan before submitting to Joy Massey's colleagues along with the updated delivery plans and risks.</p> <p>Lynn moved on to speak about enclosure 4b, the proposed future workplan, which focused on the 7 priorities and links with other thematic partnerships, since we need to timetable this work in. She added that she would be guided by the Board on this and asked for their views. There will be a proposed separate meeting for skills and economic regeneration, whereas other items will be reported to existing Board meetings with some cross representation. It was noted that we may need to re-schedule the Children & Young People's discussion since Janine Brown would be away on leave</p> <p>Rob Bacon said that this was one of the areas that the LSP were asking us to work on, and how we work together to add value.</p> <p>The Board: Agreed this workplan, subject to checking availability and planned review in September.</p>
<p>5.</p>	<p>Quarterly reports on major programmes</p> <p>5.1 PCT World Class Commissioning</p> <p>Andy Williams informed members that the version of enclosure 5 circulated was an older version. A more up to date version is available which he will forward to Ann-Marie McElhone for circulation.</p>

Andy went on to say that there were two figures to keep in mind, namely 188 lives and £55million to be saved each year over the next 3 years. These are the numbers The PCT is working towards to achieve a 15% reduction in the inequalities gap in life expectancy in Sandwell compared with the national England average.

The detailed plans sets out how these numbers will be achieved, starting with saving lives which will mean reducing the spend on acute services.

The green square on page 1 are the QIPP priorities. This is a regional programme in the Health Services which is looking at Quality Innovation, Productivity and Prevention initiatives. QIPP is designed to help us achieve less expenditure while still achieving quality

Andy said that the key message to convey is that we have got a series of strategic plans to help us save lives and money. These are reflected in PCT contracts, partnership working and other strategic programmes. Going forward, the intention is to show these two statistics year on year and the progress being made on them.

Finally, the corporate objectives agreed by the PCT also reflect these priorities. The key areas of intervention and saving lives hinge on our screening programmes and optimising treatment.

Karen Dowman felt that the slides were a very clear way of showing this plan. Andy said that they have worked hard to come up with a version that explains the plan simply.

Pam Jones commented that whilst this version was clear, it could not be handed to a member of the public without some sort of discussion. Richard Nugent suggested that it may be useful to have a preface that went along with the document. He referred back to linking all these reports together as well as linking them to the statistics that Rob spoke about.

Andy added that this starts to set out key messages made in John Middleton's annual public health report. Whilst it does not answer this agenda it does start to address it, since for the first time these figures are being built in as part of the commissioning process.

Richard Nugent queried the risk analysis on this? Andy agreed that the plan was absolutely critical to a number of things. This plan represents the right things to do and we now need to look at some issues which are out of the PCT's control.

Richard Nugent asked Pam for her view on this. Pam indicated that whilst it does set things out, it should be simplified further for the community. Pam suggested that she take the document to the LINK management team to get their view on this and will in turn feed back to Health and Wellbeing Board.

Rob Bacon wondered if what we needed was a public covenant on what we are going to deliver next year. The public may be more interested in things such as what are we going to do around palliative care next year for example.

	<p>Pam added that it also required an explanation of ‘why’ we were doing these things, and she felt it was important to make the reference to the 188 lives to be saved.</p> <p>Andy Williams said that three public meetings had taken place in preparation for updating and submitting the plan. The audience was different to those who took part previously and when the plan was set out, people ‘homed’ in on the prevention agenda much more so than before.</p> <p>The Board: Noted the contents of the report and it was agreed that an up-to-date version will be submitted to members.</p> <p><u>For Information</u></p> <p>5.2 Right Care, Right Here Programme 5.3 Adult Social Care Transformation and Personalisation</p> <p>These two items were for information only. Richard Nugent referred to enclosure 7 and queried progress on personal health budgets. Rob Bacon responded that this was one of the Investing for Health projects and there is no timetable for this work yet.</p> <p>Pam Jones took the opportunity to voice some concerns reported around the wider engagement arrangements on personal budgets discussed on page 5 of enclosure 7. Pam is aware of the various consultations going on, but there is concern about the money people will get, not being enough for what they need. Whilst representatives sit on some of these groups it appeared that their concerns are not being reflected in these reports.</p> <p>Andy Williams felt that the Ambassadors Forum may not have looked at concerns over this as a system, but more in relation to how it works for the service user. He suggested that he feed this back to Glynn Dixon.</p> <p>Richard Nugent suggested that Pam as Chair of LINK should request time to speak to Glynn Dixon about this.</p> <p>The Board: Agreed that Pam Jones and Andy Williams raise this issue with Glynn Dixon.</p>
<p>6.</p>	<p>Governance Matters</p> <p>6.1 Update and Issues from Sandwell Local Involvement Network Pam Jones referred to her report, enclosure 8, circulated to members prior the meeting. Pam informed members that LINK held an away day last Friday (26th March) to look at what they have achieved in the past year, she added that out this task it was recognised how much they have done in the last 12 months.</p>

Two things raised from the away day were around representation and prioritisation. Pam said it was quite difficult for individuals to represent LINK on committees and Boards like this. LINK are being inundated with things to do, so they have been required to prioritise things more.

Pam said that this is now the end of the second year of LINK (out of a 3 year lifespan). At the next AGM they will be looking at what will happen in year 4 and beyond. They are also looking into social enterprises.

6.2 Joint Strategic Commissioning - feedback from Adult Services and Health Workshop and proposed Partnership approach

Rob Bacon spoke to this item. He referred to Alan Dean's report circulated as enclosure 9 and 9a. He indicated that this report covered everything that has been done to date. There has been some difficulties this year over confusion around joint commissioning intentions, but this has now been resolved.

A workshop was held in February, and the outcomes of this were looked at by a small group consisting of Rob, Alan Dean, Andrea Pope-Smith and Andy Williams.

The aim is to establish a single partnership structure and it has been agreed that a joint strategic commissioning executive between the PCT and Adult Services and Health will be established. Meetings will be held 4 times a year with it's first year focusing on specific things, as captured on page 2 of Alan's report, under 'Actions and Recommendation's'.

With regards to accountability, this will still be through the organisational Boards.

Richard Nugent asked how this related to the Health and Well-Being Board. Rob responded to this and Richard in turn queried if ultimately it meant that pooled budgets for example, Mental Health, would come under this? Rob indicated that at this stage it was not about changing current Partnership Board arrangements, but would more support the commissioning cycle and inform work of these Boards.

Pam Jones asked if this was going to have an effect on provision of services and added that whilst there was a lot of joint working at the minute that isn't being reflected in the community. Rob indicated that excellent joint strategic commissioning can only improve service provision.

**The Board:
Agreed the recommendations of the report.**

6.3 Report back from LSP Executive - 18th March

Rob Bacon spoke to this item. He indicated to members that with regards to the LSP Executive meetings there are no minutes, but rather an action log is kept.

Rob moved on to refer to page 4, and the fourth action captured. This was around encouraging staff and family to participate in active lifestyles. Rob said that the LSP talk a lot about working together as partners to achieve our targets.

On page 5, discussion had take place around safeguarding children. Rob queried if the Ofsted report had came to the Board. Janine Brown confirmed it has not.

Page 6 and discussion around the Environment Partnership. Rob said that the PCT are engaged quite a bit with the Environment Partnership. Richard Nugent added that that this included some of what the Healthy Urban Development Group are doing.

Page 7 - Achieving more for less. This is based on the Total Place agenda and 'how can we work jointly to improve value for money'. Joy Massey is leading this work in the LSP.

Page 8 - Sandwell Hub. This has been very successful. More money has been agreed to fund this so that it has proper administration support. They have sked for more accountability around the hub and how this money is being used.

Karen Dowman said she has attended a lot of seminars around Total Place and the running of some pilots. Richard Nugent indicated that the Hub is an example of this. He then asked Gary Stevens if he had heard anything in this regard? Gary responded that the Birmingham pilot was running very well.

Karen Dowman suggested that it may be worth looking at piloting some examples here in Sandwell and Rob said there are a lot of good examples we could consider.

Richard Nugent said that this is about putting together a systematic approach. Karen added that this is also about thinking very differently what an individual needs, and it is different from personalisation. Pam Jones added that it's not just about the service it is about the individual. Karen agreed with Pam and said that it means a patient does not have to 'plough' through different parts of the system to get what they need.

Rob Bacon indicated a meeting is taking place with Andrea Pope-Smith to look at Total Place discussions can be fed back here.

The Board:

Agreed that the Board will give further consideration to developing a Total Place pilot based on feedback from the above joint discussions.

7.	<p>Agenda items for next meeting (Performance focus)</p> <ul style="list-style-type: none"> • Quarter 4 2009/10 performance reports • Report back from LSP Executive • Joint Strategic Needs Assessment; Chapters on CHD, Alcohol and BME • Progress report on Arts and Health Strategy • Valuing People Now - The Physical Health of People with Learning Disabilities • Annual Public Health Report • Albion Foundation Programme • Health and Wellbeing Board Stakeholder event - future proposals
8.	<p>News and Information</p> <ul style="list-style-type: none"> • Special Edition Newsletter <p>Lynn Jackson informed members that the special edition newsletter has been confirmed and is almost ready for circulation. This newsletter will feedback the outcomes of the stakeholder event held in January.</p>
9.	<p>Any Other Business</p> <ul style="list-style-type: none"> • LSP Risks <p>Lynn Jackson referred to the tabled document entitled 'Strategic Risk Management'. Lynn is meeting with Alan Dean and Paul Southon to look at this next week. The Board is being asked to provide some evidence of mitigation against these risks.</p> <p>Lynn asked if members of the Board had any suggestions of what we should be doing in this regard.</p> <p>Richard Nugent felt that risk 3 was an important one and we needed to look at how we approach this linked to earlier discussions regarding the Total Place agenda (item 6.3 refers). We also need to make it more explicit in our workplan about these risks.</p> <p>The Board Agreed that the Board's views would be built into the work done on the Health & Well-Being Board's input to mitigating LSP Strategic Risks</p>
10.	<p>Next meeting date (Performance focus)</p> <p>Monday 10th May 4:30 - 6:30pm Lancaster Room, Carters Green Business Centre 2 384 High Street, West Bromwich B70 9LB (Opposite Sidhu's Pharmacy)</p>