

Health and Well-Being Board

**Tuesday, 4 November 2014, 2.00 pm, Council Chamber,
County Hall**

Minutes

Present:

Mr M J Hart (Chairman), Dr C Ellson (Vice Chairman), Mrs S L Blagg, Mrs E A Eyre, Mr Simon Hairsnape, Mr A I Hardman, Richard Harling, Dr A Kelly, Clare Marchant, Mr P Pinfield, Gail Quinton, Dr Simon Rumley, Mrs C Cumino and Mrs A T Hingley

Also attended:

Frances Howie, Frances Martin and Richard Keble and Martin Heuter.

261 Apologies and Substitutes

Apologies were received from Cllr. Hannah Campbell, Brian Hanford, Superintendent Mark Travis and Dr Jonathan Wells.

Cllr. Phil Grove attended on behalf of Cllr. Campbell.

262 Declarations of Interest

None.

263 Public Participation

There were two public participants.

Anne Duddington spoke on behalf of the three carers involved in the Carers Strategy Working Group and made the following main points about the Carers' Strategy Refresh:

- The working group only actually involved carers in person at one meeting and the document that was being presented to the Board bore little resemblance to the last version they saw,
- Carers and carers' organisations had been asking for updates on the strategy for over a year but the paper had only become available when the Board agenda was published,
- The vision, principles and outcomes were discussed in very broad terms at a meeting in March but no discussions had taken place since and even the definition of carer had changed since that early meeting,
- The term 'we' was used throughout the document without reference to whom this term refers,
- A small group of carers had looked at the document last week and felt it lacked evidence and used

terminology that was not accessible. The carers on the strategy group felt insulted by the document and felt it did not give the impression that their roles were valued,

- Good examples of strategies developed in partnership were the Learning Disability Strategy and the previous Carer's strategy.
- Finally carers were very unclear about what would happen next as the document did not provide the detail about what type of support and services carers could expect from April 2015.

Colin Archer made a statement as a Board member of Carers Action Worcestershire which was a consortium of the four main carer focussed organisations in the county. He felt the Carers Strategy Refresh did not 'reaffirm the commitments originally made' as was claimed. He went on to make the following points:

- Early drafts of the strategy covered carers of all ages so it was a disappointment to find that the young carer's strategy would now be a separate document,
- They had concerns about the lack of health partner involvement and the fact that there was no mention of the NHS Commitment to Carers,
- 6 weeks was too short for the consultation period,
- They would like to know what approach would be taken to charging for services for carers which are currently provided free and there was no indication of the level of funding to be committed to supporting carers,
- The definition of a carer had been changed and they wanted to know why,
- Finally they disagreed with the statement that the 'statutory and voluntary sector partners would nominate a main contact to develop a detailed action plan and oversee implementation' because they felt that should be the role of the commissioner.

The Chairman thanked the public participants and stated that the Carers Strategy refresh would be discussed at item 6 on the agenda.

264 Confirmation of Minutes

The minutes of the meeting of 23 September 2014 were agreed to be a correct record of the meeting and were signed by the Chairman.

265 Autism Strategy Update

Richard Keble explained that following the Autism Act 2009, the National Strategy for Autism required local authorities to develop a local Autism Strategy and to appoint a lead which in Worcestershire was Elaine

Carolan.

The Draft Autism Strategy for Adults had been developed by the Autism Strategy Partnership Group which included adults with autistic spectrum conditions, family carers, third sector partners, Worcestershire Health and Care Trust, the Council and CCGs. The Strategy gave the commitment by all partners to comply with national requirements.

It was proposed that there be a six week consultation with the outcome being brought back to the Board in January.

In the following discussion the following points were made:

- That although there were different legislative frameworks for Adults and Children's strategies, the aim should be an all age strategy. It was reported that there was a consultation on children's autism services ongoing and it was suggested that the outcome of this along with the outcome of consultation on the adults' Strategy be brought to the Board in January with a view to developing an all age Strategy, perhaps for March 2015,
- It was agreed that a longer consultation period would be preferable but that six weeks should be sufficient and that this could be reviewed in January,
- It was queried whether any schools were included in the Strategy Partnership Group, however it was highlighted that this was an adults Strategy and therefore not directly relevant to schools. The Board requested that schools should be involved in the children's Strategy and the development of an all age Strategy,
- The Board also requested that further education providers and employers be involved in consultation, further development and implementation of the Strategy,
- It was confirmed that input had been received from the Health and Care Trust and from the CCGs although this could be improved. Further training for staff around autism would need to be organised. The voluntary sector was likely to have an important role in providing training.

In summary the Chairman explained that further work was required to integrate the adult's Autism Strategy with

a children's and young people's Autism Strategy. The consultation would go ahead as planned but a progress report would be required at the January Board meeting with a view to developing an all age Strategy for March.

RESOLVED that the Health and Well-being Board:

- a) **Considered and discussed the content of the Draft Autism Strategy for Adults in Worcestershire;**
- b) **Authorised consultation on this Strategy and requested a progress report be brought back to the Board in January 2015 for consideration, along with a progress report on consultation on a children and young people's Autism Strategy;**
- c) **Requested that an all age Strategy be developed and brought back for consideration and sign off in March 2015.**

266 Carers Strategy Refresh

Richard Keble explained that the Carers Strategy was being refreshed in light of the Care Act 2014. The Strategy covered adults aged 18 and over. A Young Carers' Strategy would be brought to the Board meeting in January.

In response to comments made to the Board by public participants about the consultation period it was suggested that this should be extended.

The Chairman moved the motion that a twelve week consultation period would be more appropriate than six weeks and that the final Strategy should then return in March 2015. This was agreed by the Board who agreed that the extra time would be helpful to allow to a full consultation with carers' organisations in Worcestershire.

In response to the question put by public participants about the definition of a carer, which had been changed in the refreshed Strategy, it was explained that the definition now matched the definition in the Care Act.

In response to comments about young carers the Board noted that a Young Carers Strategy was scheduled to be considered at the January 2015 meeting and that consideration should be given to developing an all age Strategy.

Healthwatch were concerned about the lack of consultation with the public, service users and carers for the Autism and the Carers Strategy. They supported the representations made by the public participants and hoped that more meaningful engagement and involvement would occur in future for all significant strategy documents. Although a number of Board Members felt uneasy at the situation there was a genuine commitment to moving forward in a positive, constructive and 'co-produced' manner. It was expected that future strategies would reflect a much more engaged and jointly owned approach and Healthwatch would be willing to play its part to ensure that this was delivered.

A Board member suggested that the Strategy should be re-worked before it went out to consultation but generally Board members felt that, the consultation should go ahead. The Chairman agreed it should be a Worcestershire Strategy and that the consultation should go ahead, but with a longer consultation time that allowed the Council to listen and be prepared to amend the Strategy.

RESOLVED that the Health and Well-being Board:

- a) **Considered and discussed the content of the Draft Adult Carers' Strategy for Worcestershire;**
- b) **Authorised consultation on this Strategy and requested that a progress report on the extended consultation, the Young Carers' Strategy and the potential to develop an all age Carers' Strategy be brought back to the Board in January 2015 for consideration,**
- c) **Request that the final strategy(ies) be brought back for consideration and sign off in March 2015.**

267 The Better Care Fund

Frances Martin confirmed that the Worcestershire 2015/16 Better Care Fund (BCF) Plan had been fully approved, one of only six nationally to be given this status. A lot of work was now required to implement the Plan.

The latest forecast for the 2014/15 BCF was a £232,000 underspend, taking into account the winter pressures contingency money.

When asked how it was planned to engage with the public it was explained that a Plain English Summary of the plan was being developed which would then be distributed more widely.

RESOLVED that the Health and Well-being Board:

- a) **Noted the full Better Care Fund Plan submitted on 19 September 2014,**
- b) **Noted the current forecast position of the 2014/15 Better Care Fund,**
- c) **Supported the ongoing work (through the Well Connected programme) to implement the 2015/16 Better Care Fund Plan in the context of the Worcestershire Five Year Health and Care Strategy. This would include development of an appropriate Section 75 agreement,**
- d) **Would consider any proposals for redesign and re-commissioning of services funded by the Better Care Fund as they arose, including as they related to integrated health and adult social care re-ablement and rehabilitation services.**

268 6 Monthly Progress Report from the Health Improvement Group

Frances Howie gave an overview of the work of the Health Improvement Group (HIG) which was set up in March 'to lead, co-ordinate and ensure progress of action to improve health and well-being, focussing on health inequalities and the wider determinates of health and well-being in Worcestershire.' The HIG had met three times with membership including District Councils, the Police, Housing, Voluntary Sector Representatives, CCGs and the University of Worcester.

The HIG supported and monitored the delivery plans of three of the four HWB priorities: the Alcohol Plan, the Mental Well-being and Suicide Prevention Plan and the Obesity Plan. The HIG also considered District Health and Well-being Plans. The HIG Annual Report would be presented to the Board in May 2015.

Board members asked about the impact of the work so far and the outcomes achieved. It was explained that this report was just an introduction to the work of the HIG and that outcomes would be included in the Annual Report.

269 Consumer Experiences of the Health and Social Care Complaints System

In his '5 year View of the NHS' Simon Stevens looked to local leaders to take action on alcohol and obesity. Board members wished to know what actions Worcestershire were taking. It was clarified that these were included in the relevant and included actions such as assessing planning applications for fast food outlets close to schools.

Each District Council had Health and Well-being Groups who had the support of Public Health consultants. Each area looked at issues which were relevant to the local area for example Malvern Hills had a project which looked at the high number of falls in their area.

RESOLVED that the Health and Well-being Board:

- a) Considered and commented on progress made between March and September 2014, and**
- b) Requested that the Health Improvement Group Annual Report be presented to the Board in May 2015.**

Peter Pinfield explained that Healthwatch nationally had produced a report about consumer experiences of health and social care complaints systems. The report had been well received by central government and other health and social care organisations and he hoped that all Board members could ask their own organisations to look at their own complaints procedures to ensure that they were consistent with the principles outlined in the report and were. simple, compassionate and responsive to patients and service users.

He asked whether this work could be included within the communication and engagement workstream of Well Connected and take place over the next 12-18 months.

Board members agreed that it would be useful to review their own complaints procedures with a view to working to a common set of principles. They noted that it was important that this applied to adults' and children's. They also noted that it was important to consider the impact of complaints on staff.

RESOLVED that the Health and Well-being Board:

- a) Received and took note of the Healthwatch England Report "suffering in**

270 **Adults
Safeguarding
Board Annual
Report 2013/14**

Silence...listening to consumer experiences of the health and social care complaints system,"

- b) Asked the key stakeholders to raise the contents and recommendations of the report with their respective Boards, and**
- c) Would ask the Strategic Partnership Group to look at the possibility of developing a Worcestershire wide complaints model that incorporated some commonly owned basic principles. This work would sit within the Well Connected communication and engagement workstream. The Board requested that a progress report be brought to a future Board.**

Pete Morgan, the former Independent Chair of the Worcestershire Safeguarding Adults Board, presented the Annual Report for 2013-14.

During the last six months the number of alerts had increased, likely due to a change in the recording procedures. The number of alerts which were converted into referrals had not increased. Some of the alerts were found to be non-safeguarding issues. The outcome of the Francis report may have generated some of the increase in alerts.

During 2013/14 a lot of work had been carried out to ensure that the Safeguarding Adults Board was Care Act compliant. The new structure was beginning to bed down and a virtual network was being developed.

The Board was urged to think about resourcing for the Safeguarding Adults Board which had a budget of £70,000 compared to the Children's Safeguarding Board which received over £200,000. The two Safeguarding Boards did work together on some issues and as the Council encouraged people to Think Family, the Board was reminded that families were often made up of three or more generations, not just parents and children.

A Board member asked how cases were selected for a serious case review. It was explained that this was on the basis that abuse or neglect had caused a death or serious harm.

The Chairman and Board Members thanked Mr Morgan for the work he had done with the Safeguarding Adults Board.

271 Analysis of safeguarding in Worcestershire in response to the Francis Report

RESOLVED that the Health and Well-being Board noted and endorsed the Worcestershire Safeguarding Adults Board Annual Report 2013/14.

Pete Morgan and Diana Fulbrook (Independent Chair, Worcestershire Safeguarding Children's Board, explained that even though there was no direct reference to Safeguarding in the Francis Report, there were some implicit recommendations and that these had been considered by the Safeguarding Boards and assurance on progress against the actions identified was included in the reports provided.

For Safeguarding Adults assurance was provided about:

- Safeguarding Alerts,
- Reporting processes understanding,
- Complaint procedures,
- Commissioning activities, and the
- Relationship between the Worcestershire Safeguarding Adults Board and the Care Quality Commission.

For Safeguarding Children assurance was were given about:

- Quality and safeguarding assurance
- Culture
- Voice of the Child and Family/User feedback
- Openness, transparency and candour
- Information

It was confirmed that no outstanding issues had been identified, although the report represented a snapshot in time and organisations could not afford to be complacent. Pete Morgan also highlighted that not all organisations had contributed to the Safeguarding Adults' Board assurance process.

RESOLVED that the Health and Well-being Board:

- a) Noted the Worcestershire Safeguarding Children's and Safeguarding Adults analysis of progress against the recommendations in the Francis report relevant to Safeguarding,**
- b) Supported the Safeguarding Adults' Board in seeking further assurance against the**

proposed actions and asked that progress be included in the next Annual Report , and

- c) **Noted the progress of Safeguarding Children's Board assurance process in response to the recommendations of the Francis Report and requested further updates through the next Annual Report.**

272 Future of Acute Hospital Services in Worcestershire

Simon Hairsnape explained that the assurance process was proceeding with the Clinical Sennate assessing the preferred option. However with the election coming up in May 2015 it would not be possible to consult during the purdah period leading up to the election. Consultation would therefore be starting in late spring 2015. Decisions would then be made in Autumn 2015 and implementation would be likely in early 2016. In the meantime the programme board would continue to work to ensure that acute services were safe.

RESOLVED that the Health and Well-being Board noted the update regarding the Future of Acute Hospital Services in Worcestershire.

273 Future Meeting Dates

Development Meetings all at County Hall
Wednesday 3 December 2014 2.00pm

Dates 2015

Public Meetings 2015

Wednesday 28 January 2.00pm

Tuesday 3 March 2.00pm

Tuesday 12 May 2.00pm

Wednesday 15 July 2.00pm

Tuesday 22 September 2.00pm

Tuesday 3 November 2.00pm

Development Meetings 2015

Tuesday 10 February 2.00pm

Tuesday 14 April 2.00pm

Tuesday 16 June 2.00pm

Tuesday 13 October 2.00pm

Tuesday 8 December 2.00pm

The meeting ended at 3.45.

Chairman