



Bristol Clinical Commissioning Group

Bristol Health & Wellbeing Board
Working together to improve the health and wellbeing of
Bristol

Minutes of a Meeting of the
Health and Wellbeing Board
4th July 2013 at 2.00 p.m.

Attendees - Members of the Board:

Councillor Barbara Janke (Chair)
 Councillor Helen Holland (Councillor Hickman as substitute)
 Councillor Claire Hiscott
 Councillor Glenys Morgan (Councillor Townsend as substitute)
 Ewan Cameron, Chair, Inner City East Locality Group
 Dr Martin Jones, Chair, Bristol Shadow Clinical Commissioning Group
 Annie Hudson, Strategic Director, Children, Young People and Skills (Claudia McConnell as substitute)
 Steve Davies, Vice Chair South Bristol Locality Group
 Alison Moon, Director of Quality and Transformation
 Dr Ulrich Freudenstein, Chair, North & West Locality Group
 Jill Shepherd, Chief Officer, Bristol CCG
 Alison Comley, Strategic Director, Health and Social Care
 Janet Maxwell, Strategic Director of Public Health, Bristol City Council
 Rachel Robinson, Chief Executive, The Care Forum
 Keith Sinclair, Carers' Support Centre
 Peter Walker, Voluntary Community Sector Assembly
 Linda Prosser – Director of Commissioning, NHS England

Others in attendance:

Kathy Eastwood, Service Manager: Health Strategy (supporting the Board)
 Judith Brown and Richard Smale - Healthy Futures
 Suzanne Ogborne, Project Administrator: Health Strategy
 Allison Taylor, Democratic Services Officer

1. Welcome and Apologies for Absence

Apologies were received from Councillor Holland with Councillor Hickman attending as substitute, Councillor Morgan with Councillor Townsend attending as substitute. Apologies also received from Annie Hudson with Claudia McConnell as substitute and from Ewan Cameron and Martin Jones.

2. Chair's Business

The Chair welcomed Anna Brinkoff and Kay Burnett who were observing. There were also two members of the Environment Agency in attendance and a Doctor working in Public Health observing.

3. Minutes of the Meeting Held on 23rd May 2013 and Matters Arising.

The Chair asked that Item 5 – Report of the Police and Crime Commissioner, bullet point 4 regarding the need for additional beds for individuals with mental health needs be annotated as a specific action for the Police and Crime Commissioner. She also asked that 23 May and 4 July minutes be sent to the Police and Crime Commissioner for her necessary action.

Steve Davies referred to Page 7 – BCG response to the Francis Report, and asked that an additional bullet point be included as follows:

- The importance of the Board moving beyond organisational boundaries was emphasised.

Rachel Robinson referred to Page 8, Presentation on HealthWatch Bristol, and provided the following bullet point for the Minutes :

- Rachel Robinson to confirm the arrangements for Healthwatch in relation to children and young people. Healthwatch did cover children and young people, but not all of the enter and view arrangements apply in the context of children's settings.

ACTION: Allison Taylor

Kathy Eastwood undertook to bring a short proposal note to the next meeting.

ACTION: Kathy Eastwood

The minutes of the meeting on 23rd May 2013 were therefore agreed, subject to the changes noted above.

Matters Arising.

The Chair asked that Gillian Douglas bring a report to the Board fairly soon on action against women.

Kathy Eastwood referred to Page 9, regarding the joint event with Scrutiny. She reported that this was to take place on 3 October and was to be called 'Who does what'. She agreed to send a notice to all Board members.

ACTION: Kathy Eastwood

4. Public Forum

The Chair reported that there had been no formal Public Forum received within deadline but she had agreed to hear a question from Mike Campbell of Protect the NHS.

Mr Campbell asked :

'Having recently attended a CCG Board meeting, I have heard that there has been an under-utilisation of £2.7m at Emersons Green ISTC. Was this considered good value for money ?'

The Chair agreed to refer this to the appropriate officer and that a response be sent to Mr Campbell and this be brought back to the Board.

Mr Campbell also reported that he had not yet received a response from his statement at the May meeting. Kathy Eastwood reported that a response had been done and she would send out the response.

5. Code of Conduct and Conflicts of Interest

The Board received a report from Shahzia Daya, Legal Services, Bristol City Council. There was a Powerpoint presentation to support the written documentation.

The following key points were made:-

- Under the Localism Act 2011, this Council had adopted its own local code based on the LGA's model template and adding an equalities code;
- The Code binds members and co-opted members to seven key principles of public life;
- Examples of good conduct included championing the needs of residents and being open and transparent and were based on common sense;
- Now that this Board had Statutory status, all members were required to fill out the Register of Interests form and submitted to the Council within 28 days. Non submission was a criminal offence enforceable by the Police;
- Audit Committee enforced pecuniary interests matters. A pecuniary interest was any financial interest of an individual and their spouse or civil partner including employment, contracts and property. Any new interests subsequent to the Declaration must be notified within 28 days. All pecuniary interests must be declared at a meeting and you must not take part in the discussion. Guidance stated that you should leave the room. It was a criminal offence not to declare a pecuniary interest at a meeting with a £5000 fine and for Councillors disqualification for five years;
- Pre-determination meant closing the mind to all considerations before all the facts had been considered at a meeting. This was not permitted but a predisposition was permitted ie. An individual was minded to decide something but would take a decision after all the facts had been heard. It was important that that individual's showed no bias ie. Private interests outweighed public interests;
- If in any doubt, members should ask for advice.

The Chair noted that the Register of Interests form had been sent to all Board members and therefore requested that the forms be submitted in good time.

6. Ways of Working/Terms of Reference

The Board received a report from Kathy Eastwood, Service Manager, Health Strategy, Bristol City Council.

The following key points were made :-

- The 'Ways of working' document supplemented the Terms of Reference agreed at Full Council in May 2013;
- The key changes related to the membership. It was proposed that there be two representatives from Bristol HealthWatch, with one of these representing carers. It was noted that specific other representatives from HealthWatch could attend if the agenda required it;
- Councillor Radice referred to paragraph 6.2 and felt that the mechanisms to deliver the duty were not sufficiently transparent and Rachel Roberston replied that an initial meeting had been held with HealthWatch. The Chair clarified that specific HealthWatch representatives invited for particular agenda items would not then become Board members;
- The Chair also highlighted Paragraph 9.1 and that the City Director, Nicola Yates, would attend when relevant;
- Referring to Paragraph 10.3 on Delegations, Claudia McConnell agreed to add an additional point detailing the Annual Report Safeguarding Children;

ACTION: Claudia McConnell

- In reference to Paragraph 10.4 it was noted that this should also include Children, Young People and Families Scrutiny Commission. The Chair was supportive of elected members accessing the Board and emphasised the importance of Scrutiny challenging the Board and holding it to account. However, she proposed that deputised members attending the Board not be members of the relevant Scrutiny Commissions. This was not a legal requirement but was preferred practice as it placed members in a difficult position;

- It was agreed that for purposes of transparency that the Vice Chair should be a member of the CCG and it was proposed and seconded that this should be Martin Jones. It was agreed to confirm this at the next meeting when he was in attendance;
- It was noted that Appendix C detailing the wider health and care landscape did not reflect this Board's relationship with its providers and the different mechanisms that brought providers together. Kathy Eastwood reported that a piece of work had been done on mapping provider forums but it had not been completed as it proved impossible to do justice to;
- Janet Maxwell proposed, and it was agreed, that a series of open discussions with all health providers take place over a year. Kathy Eastwood agreed to build these in to the Work programme.

ACTION: Kathy Eastwood

- It was noted that the Joint Strategic Needs Assessment (JSNA) was being regularly updated and a yearly review would be brought to this Board;
- Claudia McConnell reported that the correct linkages had not been made in the Outcomes Board. There was also a need to ensure that schools were kept engaged. She agreed to liaise with Kathy Eastwood on this.

ACTION: Claudia McConnell

7. Health and Wellbeing Strategy and next steps

The Board received a report from Kelechi Nnoaham, Service Director, Public Health, Bristol City Council.

- Janet Maxwell reported that the draft strategy had undergone extensive stakeholder and public consultation and the primary outcome had been that there needed to be clearer, more focussed prioritisation. This had therefore been undertaken and had produced 12 key priorities;
- A much slimmer, easier to access document would come back to this meeting in September. Kathy Eastwood to add to Work Programme;

ACTION: Kathy Eastwood

- The Strategy would span a five-year period and would be refreshed annually;
- It was intended to provide a clear focus of the main challenges of the Board and to highlight progress on works whether positive or not;
- The Chair noted that some of the priorities would require less attention from the Board in the short term, whilst others required more. She also requested that the table be amended to include a paragraph on how each priority related to the three themes of the Board.

ACTION: Janet Maxwell.

- Alison Comley felt that the priorities were intrinsically correct. She cited her area of work – interim care – as having lots of work currently taking place but felt that areas were not as joined up as well as they could be and suggested that the Board’s focus here could help join those areas up;
- Peter Walker felt there were overarching issues such as poverty and tobacco that could be weaved into the table;
- Councillor Hickman referred to affordable food as an overarching theme as it was a significant factor in people’s health. The impact of the continued austerity measures should be continually assessed;
- The Chair emphasised the need to work across the board with overarching themes as it was not just the poor who did not eat well but older people who did not cook;
- Dr Freudenstein felt that cancer should not be included in the priorities as it was a nationally driven agenda that should not be interfered with;
- Councillor Radice highlighted that ‘physical activity’ was not sufficiently explicit. Janet Maxwell stated that this would be worked up in the health and planning priority for the next draft.

ACTION: Janet Maxwell

- Claudia McConnell asked that the first objective of the Children priority be replaced with ‘improve outcomes for children with complex needs for their emotional health and wellbeing’

ACTION: Janet Maxwell

- The Chair proposed and it was agreed that Janet Maxwell work with Peter Walker, Alison Comley, Claudia McConnell

and Dr Freudenstein on developing the priorities and to circulate a revised draft to the Board for comment before the next meeting on 5 September.

8. Work Programme 2013/14: Planning for Influence

The Board received a report from Janet Maxwell, Strategic Director of Public Health, Bristol City Council.

- Kathy Eastwood highlighted the need for timeliness in order for the Board to fulfil its leadership role rather than being informed of issues after the delivery of outcomes. She also highlighted the need for the Board to resist taking on all Charters sent to it;
- The Chair noted a clear programme for the year ahead and the importance of having a long view rather than ad-hoc approach now that the Board was a statutory body. She questioned how the Board's work would feed into both Adult and Children's Scrutiny Commissions and equally how the Board would be informed of work undertaken by Commissions. It was agreed that Alison Comley and Claudia McConnell formulate a process for this and report back.

**ACTION: Alison Comley
/Claudia McConnell**

- Peter Walker noted that Board dates clashed with this Board meeting and the Chair asked Kathy Eastwood to investigate this.

ACTION: Kathy Eastwood

- Claudia McConnell agreed to bring an update paper to the next meeting on Every Child Matters Trust – review against charter.

**ACTION: Claudia McConnell/
Kathy Eastwood**

- The Chair proposed that Kathy Eastwood circulate the work programme to the Board for consultation and this be finalised at the next meeting.

ACTION: Kathy Eastwood

- Finally, it was noted that the Board's website was nearly completed.

9. Integration Pioneer Presentation

The Board received a presentation from Alison Comley, Strategic Director, Health and Social Care, Bristol City Council.

- Alison Comley reported that there was no blue print for joining up health and social care and it could therefore be decided locally what worked best. An opportunity arose for this authority to apply for pioneer status with support from the government on how things were done. There was no funding available;
- It was agreed that the work be sponsored by HWB and a partnership group was formed to scope ambition;
- It was agreed that the focus be on an integrated approach for people leaving hospital that need rehabilitation or reablement
- There was already good integrated taking place in this area and it was therefore necessary to build on this in an innovative way;
- The work produced 5 key outcomes and South Gloucestershire Council were keen to work on those same outcome areas;
- Alison Comley thanked the Board for the scoping meeting and reported that the pioneer decision would be made at the end of August. If not selected, the work would continue anyway;
- The Chair thanked all those involved with the project.

10. NHS England – Overview of responsibilities presentation

The Board received a presentation from Linda Prosser, Director of Commissioning, Bristol, North Somerset, Somerset and South Gloucestershire Area Team, NHS England entitled 'the role that will be played by NHS England in the new NHS landscape'.

- The diagram mapped out the responsibilities of NHS England and listed the healthcare services commissioned;
- NHS England and the four local CCG's held the budgets in this area with other organisations providing advice on commissioning as well as other advisory bodies;
- NHS England now provided services that were consistent across the country whereas PCT's had varied dependent on area;

- There were 130 service specific standards to comply with and it was noted that some local hospitals might fall short of the standards, though this was unlikely for Bristol hospitals;
- The Board noted that NHS England were honouring inherited PCT primary care commitments;
- The CCGs were developing primary care strategies locally and should attend the Board at a future date for discussions;
- It was confirmed that NHS England funded immunisation catch ups but it was not possible to deliver without public health colleagues. The Chair asked whether the Board should have pursued a pro-active campaign with regards to the recent Measles epidemic and was informed that if it was agreed as a health priority and was backed up with evidence, NHS England would fund it;
- Linda Prosser agreed with Dr Freudenstein that arrangements appeared clunky and non-strategic and suggested that an event with all 4 local areas take place to consider the mechanics.

11. Winterbourne View Concordat and Review Commitments presentation

The Board received a presentation from Alison Comley, Strategy Director, Health and Social Care, Bristol City Council.

- Alison Comley reported that it had been agreed that all Local Authorities carry out a Stocktake of progress against the Concordat to be submitted on 5 July for assessment. It was agreed that the Stocktake be circulated with the minutes.

ACTION: Allison Taylor

- It was noted that locally reviews of 17 individuals placed in out of area treatment services had been jointly completed by 1 June 2013;
- Locally, a 0-25 team had been developed as part of the council change programme which was a positive transition for young adults as services did not stop at 18;
- Progress was being made so that small numbers of people with special needs are able to access services in Bristol and not leave the area;
- It was vital that reasonable adjustments were being made in mainstream services so that universal services could be offered to individuals with learning difficulties;

- This board should hold the local authority and CCG to account for delivery of the programme by receiving regular reports and challenging progress and receive an action plan on improvement areas from Stocktake in September.

ACTION: Alison Comley

- Alison Comley highlighted the importance of engaging with people about social care and equalities which would be a positive outcome from such a scandalous situation.

12. Confidential Inquiry into premature deaths of people with learning difficulties

The Board considered a report of Lesley Russ, Public Health Learning Difficulties and Autism Specialist, Public Health, Bristol City Council. Alistair Henderson, Lead Officer on Learning Difficulties Partnership Board was also in attendance.

- There was little hard evidence as to why people with learning difficulties were dying prematurely. Bristol University therefore carried out a 2-year review which looked at all deaths of 233 adults, 14 children and 58 comparator cases of people with learning disabilities. It found that 42 % of deaths were considered premature and that younger people were more likely to have premature deaths. The study made 18 recommendations which included:-
 - ◆ Reasonable adjustments – this meant receiving the same treatment as others but delivered in an appropriate way to people with learning difficulties;
 - ◆ Clear and consistent recording of people with learning disabilities across all healthcare systems and health records to follow across services. There was currently no joined up care so those without care workers could fail to have health issues picked up.
- She strongly urged the Board to make progress on these recommendations as Bristol's progress on these recommendations would be evaluated;

- Lesley Russ identified the recommendation regarding a proactive plan for long term health conditions as of primary importance for her. Such cases cost a lot of money and there were increasing numbers of people with type 2 diabetes and epilepsy who did not understand how to manage their condition;
- In terms of implementation, these recommendations had been before the Learning Difficulties Partnership Board but she was not aware that any Body had taken overall responsibility for their implementation;
- Dr Freudentstein proposed that these go before the CCG formally for response. He found it very depressing to hear that people had been through primary and secondary care without their learning difficulties being identified;
- The Chair asked that the response from the CCG be made available to the Board and asked that senior officers be responsible for implementing recommendations. She asked Alison Comley and Claudia McConnell to work with Lesley Russ and develop proposals for implementation and to submit the paper to the CCG for formal response.

**ACTION: Alison Comley/
Claudia McConnell**

13. Round-table updates

Councillor Hickman referred to FGM and the lack of adequate data available regarding the numbers who have been cut. She understood that the data was already coded at GP's surgeries. Such information was vital in providing a picture of the current situation and whether the numbers were reducing. Janet Maxwell undertook to bring this information back to the Board once primary and secondary data had been evaluated.

ACTION: Janet Maxwell

14. Standing Item: General Matters of Interest

There was none.

15. Any Other Business

There was none.

It was noted that the next meeting would be on Thursday 5 September 2013.

(The meeting ended at 4:10pm)

CHAIR