

SHADOW HEALTH AND WELLBEING BOARD AGENDA



18 June 2012

10.00 a.m.

**East Wing Main Conference Room,
Cleveland Fire Authority Headquarters,
Endeavour House, Stockton Road, Hartlepool, TS25 5TB.**

MEMBERS: SHADOW HEALTH AND WELLBEING BOARD

Voting Members (statutory members)

Directly Elected Mayor, Executive Members of the Local Authority, Chief Executive of Local Authority, Representative of Clinical Commissioning Group, Chief Executive/Director of the PCT (transitional arrangements until 2013), Director of Public Health, Director of Child and Adult Social Services, HealthWatch Board Member, Representative of the NHS Commissioning Board, Patient Representative.

Non-Voting Members (non-statutory members)

Director of Regeneration and Neighbourhoods, North Tees and Hartlepool NHS Foundation Trust, Tees Esk and Wear Valley NHS Trust, Voluntary Sector Representative(s), North East Ambulance NHS Trust, Cleveland Fire Authority.

1. APOLOGIES FOR ABSENCE

2. TO RECEIVE ANY DECLARATIONS OF INTEREST

3. MINUTES

- 3.1 To confirm the minutes of the meeting held on 23 April 2012 (*attached*)

4. MATTERS ARISING FROM MINUTES

- 4.1 Update on Troubled Families – Verbal Update by Director of Public Health

5. ITEM FOR INFORMATION

- 5.1 JSNA – Verbal update by Director of Public Health
5.2 Public Health Policy Round up – Verbal Update by Director of Public Health
5.3 Clinical Commissioning Group – Update on Authorisation – Verbal Update by Interim Chief Officer, Clinical Commissioning Group

6. ITEMS REQUIRING DECISION

- 6.1 Partnership Arrangements for the Shadow Health and Wellbeing Board – Director of Public Health (*attached*)
- 6.2 Consultation Process – Health and Wellbeing Strategy – Verbal Update by Specialty Registrar Public Health (NHS Tees)
- 6.3 Developing a Communication and Engagement Strategy for the Shadow Board – Director of Public Health (*attached*)

7. ITEM FOR DISCUSSION

- 7.1 Transport and Health - Presentation by Director of Public Health and Director of Regeneration & Neighbourhoods

8. FUTURE AGENDA ITEMS

- 8.1 Work Programme - *attached*

9. ANY OTHER BUSINESS

SHADOW HEALTH AND WELLBEING BOARD

MINUTES AND DECISION RECORD

23 April 2012

The meeting commenced at 1.00 pm in the Civic Centre, Hartlepool

Present:

The Mayor, Stuart Drummond - In the Chair

Statutory Members:-

Councillors: Hilary Thompson (Performance Portfolio Holder),

Nicola Bailey, Acting Chief Executive
Jill Harrison, Assistant Director, Adult Social Care
Louise Wallace, Assistant Director, Health Improvement
Dr Paul Pagni, Clinical Commissioning Group
Christopher Akers-Belcher, Hartlepool LINK Co-ordinator
Margaret Wrenn, Hartlepool LINK Chair

Non Statutory Members:-

Dave Stubbs, Director of Regeneration and Neighbourhoods
David Turton, District Manager, Cleveland Fire Authority
Carole Langrick, Deputy Chief Exec, North Tees and Hartlepool NHS Foundation Trust
Chris Willis, Chief Exec, North Tees and Hartlepool NHS Foundation Trust
Martin Barkley, Chief Exec, Tees and Esk Valley NHS Trust

Also Present:-

Ali Wilson, Interim Chief Officer, Hartlepool and Stockton Clinical Commissioning Group/Director of Commissioning, NHS Tees
Councillor Wendy Newall, Chair of Scrutiny, Darlington Borough Council
Rachel Fawcett, NHS Tees, Public Health
Jane Lawson, NHS Tees, Public Health

Officers:-

Sally Robinson, Assistant Director, Prevention, Safeguarding and Specialist Services
Denise Ogden, Assistant Director, Neighbourhood Services
Zoe Westley, School Improvement Advisor
Catherine Frank, Performance and Partnerships Manager
Denise Wimpenny and Angela Armstrong, Democratic Services Team

50. Apologies for Absence

None.

51. Declarations of interest by Members

None.

52. Minutes of the meeting held on 27 February 2012

Confirmed.

53. Presentation on Troubled Families (*Assistant Director, Neighbourhood Services*)

The Assistant Director (Neighbourhood Services) gave a detailed and comprehensive presentation on Troubled Families and Community Budgets. Members of the Board were informed that there were around 290 troubled families identified in Hartlepool. It was noted that Community Budgets were to be introduced by Central Government and were estimated to be £4k per family in the form of a Reward Grant. This would be paid in instalments across 3 years which would mean the local authority would need to implement an upfront payment to realign resources, redesign services and allocate dedicated staff to those families. Troubled families were identified using the 2011 Census data through a number of key elements.

The financial framework and governance arrangements were detailed in the presentation. Members of the Shadow Health and Well Being Board were requested to identify a specific representative from within their organisation to become a lead practitioner and participate in the continued development and implementation of the Troubled Families programme.

During the discussion that followed a number of areas of clarification were sought, in particular how would this programme differ and add value to the support mechanisms already in place across various organisations. The Assistant Director, Neighbourhood Services confirmed that whilst a number of organisations may be providing very effective differing levels of support to specific families, these organisations did not necessarily communicate effectively with each other. It was hoped that co-ordinating the identification of needs across troubled families would ensure a detailed action plan would be created enabling more effective support system to be in place. It was suggested that providing copies of case studies currently part of the Troubled Families programme would assist Board members understanding of the programme. In addition, it was noted that this programme would work closely with the early intervention work currently being undertaken to avoid duplication. The key issue was about working smarter and redesigning and improving the provision of services and it was recognised

that the early intervention work was a forerunner in that area.

The issues around sharing data were discussed and it was acknowledged that this was a difficult area although new legislation had been drafted that may assist with this issue through the development of a secure framework of information. Whilst the difficulties in signing up some families to participate in the programme was recognised, the importance of supporting and facilitating behavioural change was emphasised.

In conclusion, the Assistant Director, Neighbourhood Services requested that representatives from the different organisations involved in the Shadow Health and Well Being Board email the details of an identified Lead Practitioner from within their organisation who would assist with the development and implementation of the Troubled Families Programme. It was noted that further updates on the progress of the Programme would be reported to the Shadow Health and Well Being Board at future meetings.

Decision

- (i) The information provided within the presentation was noted.
- (ii) Representatives from each organisation involved with the Shadow Health and Well Being Board forward to the Assistant Director, Neighbourhood Services an identified representative from within their organisation to be Lead Practitioner and participate in the development and implementation of the Troubled Families Programme.
- (iii) That further updates be provided to the Shadow Board at regular intervals.

54. Draft Hartlepool Joint Health and Well Being Strategy 2013-18 *(Assistant Director, Health Improvement)*

The Assistant Director, Health Improvement provided the Shadow Board with an update on the draft Hartlepool Joint Health and Well Being Strategy 2013-18. The importance of prioritising issues that were pertinent and relevant and ensuring that appropriate tools were in place to achieve this was emphasised. It was noted that within Appendix 4 a number of priority policy areas were outlined from the Marmot report (2010) and the following two key areas were highlighted as key to ensuring all remaining priorities fall into place and they were:

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives.

The importance of changing people's aspirations around their health and well being to ensure they aspire to lead long and health lives was discussed. It was highlighted that communication and raising awareness

with the public was key to progressing the Joint Health and Well Being Strategy. A key issue to improving this was to utilise the forthcoming Face the Public Event to be held on 17 July 2012 as well as the local organisations such as LINK. It was noted that further detail on the prioritisation, process, consultation and engagement and the timescales involved would be reported to the next meeting of the Shadow Board in June 2012. A representative from the Clinical Commissioning Group (CCG) highlighted that the CCG was currently undergoing the authorisation process and would be required to submit supporting documentation in September 2012 and added it would be really useful to include the Health and Well Being Strategy 2012 as it was a key document.

The importance of raising awareness of the positive health stories in the town such as the recent reduction in coronary heart disease and increase in life expectancy for females was also discussed.

Decision

- (i) The progress of the draft Hartlepool Joint Health and Well Being Strategy 2012-18 was noted.
- (ii) That the use of prioritisation tools be examined and reported back to a future meeting of the Shadow Board.

55. Verbal update on Public Health Transition (*Assistant Director, Public Health*)

The Assistant Director, Public Health provided an update on the Public Health Transition. Overall the process of assurance had been useful to enable an external view of the plan to be ascertained and within the next 12 months, subject to guidance and staffing, the plan would be delivered where it was needed and to the timescales identified.

It was noted that very positive feedback had been received on the plans and the joint working being undertaken with the pace increasing nationally through the appointment of the Chief Executive of Public Health England, Duncan Selbie.

Decision

The update provided was noted.

56. Verbal update on Special Educational Needs Pathfinder Bid (*School Improvement Advisor*)

The School Improvement Advisor provided an update on the pathfinder bid for special educational needs and it was noted that this would instigate the most wide reaching, biggest changes to special educational needs in 30

years. The Board were informed that Hartlepool and Darlington had jointly submitted a bid to be a pathfinder area and it was announced in September 2011 that the bid was successful. It was noted that there were 9 families in Hartlepool signed up to be part of the trial and co-ordinated assessments had already commenced. The main aim was for every child with special educational needs to have a single plan to identify their specific needs and requirements, possibly through personal budgets, and ensure a co-ordinated approach was in place to support that child and their family. In relation to the governance arrangements, it had been suggested by the Department for Education and Department for Health that Health and Well Being Boards would be the mechanism for this. Therefore, the School Improvement Advisor sought the views of the Shadow Board to how this should be progressed.

A Member sought clarification on the views of the schools and agencies on the implementation of this pathfinder. The School Improvement Advisor confirmed that the majority of schools and agencies were positive about the pathfinder as an effective tool for the provision of support to children with special educational needs and their families. The importance of tracking the success of the pathfinder and measuring success against the resources being utilised was discussed as well as ensuring the Shadow Board was kept up to date with the pathfinder especially evaluating the outcomes achieved for families was highlighted. It was therefore suggested that update reports be provided to the Shadow Board once every six months.

Decision

- (i) The update provided was noted.
- (ii) That as part of the governance arrangements, further reports be provided to the Board every six months.

57. Draft Immunisation Strategy (incorporating an action plan which indicates key priorities relating to immunisation uptake) *(Assistant Director, Health Improvement)*

The Assistant Director, Health Improvement presented a report which provided the background to the implementation of the Immunisation Strategy and the five key areas to ensure an effective implementation of the strategy. The aims and objectives of the Strategy were included within the report as well as current progress and future challenges. It was noted that Head Teachers across Hartlepool schools were fully supportive of increasing immunisations and raising awareness through a targeted approach. A Member indicated that the use of the Council's publication Hartbeat should be explored to raise awareness of health issues affecting the community. The action plan included working closely with primary care to ensure the sharing of good practice was taking place. In addition, the importance of effective note taking by health professionals was highlighted as a key issue to ensuring immunisations were up to date. It was noted that

further reports on this issue would be submitted to the Board in the future.

Decision

The Draft Immunisation Strategy was approved.

58. Partnership Arrangements underneath the Shadow Health and Well Being Board *(Performance and Partnerships Manager)*

The report sought approval for the partnership arrangements that sit underneath the Shadow Health and Well Being Board and how they would feed in and support the work of the Shadow Board. The report provided the background to the proposed partnership arrangements and listed a number of organisations that had been identified as currently in existence.

The importance of ensuring effective patient and public engagement was in place was discussed including ensuring that the organisations involved added value to the Shadow Board. Clarification was sought on the status of some of the organisations and whether they remained statutory groups, how often the groups met and details of their role and remit should be fed back to the Shadow Board. Further consideration of what performance management framework should be in place for the Shadow Health and Well Being Board to move forward.

Decision

- (i) That details of whether the organisations outlined in the report remain statutory, how often they meet, what was their role and remit and how they fit in with the Shadow Health and Well Being Board.
- (ii) That further consideration be given to the performance management framework for the Health and Well Being Strategy.

59. Future Agenda Items *(Assistant Director, Public Health)*

The Assistant Director, Public Health confirmed that the issues raised at this meeting would be incorporated into the Shadow Health and Well Being Strategy Board's work programme for 2012/13.

A further suggestion was made in relation to the Work Programme updates on the future changes affecting the NHS to ensure everyone had the most up to date information.

It was noted that the Shadow Board would be examining the health improvements and in life expectancy within the town including comparative information on community profiles.

In relation to the governance arrangements for the Shadow Board, the Assistant Director confirmed that guidance was still awaited on the future governance arrangements, but Overview and Scrutiny were currently examining how scrutiny could undertake an effective role in these arrangements.

Decision

The issues noted above would be incorporated into the Work Programme for the Shadow Health and Well Being Board.

The meeting concluded at 2.46 pm

CHAIR

SHADOW HEALTH AND WELLBEING BOARD REPORT



Report of: Director of Public Health

Subject: PARTNERSHIP ARRANGEMENTS FOR THE
SHADOW HEALTH & WELLBEING BOARD

1. PURPOSE OF REPORT

- 1.1 To consider and agree the proposed partnership arrangements for the Shadow Health & Wellbeing Board and how they will feed in and support the work of the Board.

2. BACKGROUND

- 2.1 At the last meeting of the Shadow Health & Wellbeing Board there was discussion about the partnership structure that would support the work of the Health & Wellbeing Board. It was noted that the new partnership arrangements needed to build on the strengths of the previous structure but also allow flexibility so that the structure could be responsive to emerging areas of concern.

3. PROPOSAL FOR CONSIDERATION

- 3.1 Rather than identify a static range of groups that fall under the Health & Wellbeing Board it is proposed that a more fluid approach be taken. This will ensure that Groups are created and maintained only where necessary and with a clear focus and remit. It is anticipated that the majority of these will be task and finish groups rather than ongoing groups.
- 3.2 In order to reflect the role of wider determinants within the Health & Wellbeing Board's agenda it is proposed that all groups are clustered under the 6 Marmot policy areas. These policy areas as set out below will also be a key feature of the Health & Wellbeing Strategy:
- Give every child the best start in life;
 - Enable all children, young people and adults to maximise their capabilities and have control over their lives;
 - Create fair employment and good work for all;

- Ensure healthy standard of living for all;
- Create and develop healthy and sustainable places and communities;
- Strengthen the role and impact of ill health prevention.

3.3 It is proposed that owners are identified for each of the above from the Shadow Health & Wellbeing Board Members. They will be the key contact for all groups under that policy area and will provide the link into the Shadow Health & Wellbeing Board. It is also recognised that the other theme groups will have key roles to play in the delivery of the policy areas and in some areas may take the lead for example:

- Economic Regeneration Forum - Create fair employment and good work for all
- Housing Partnership - Create and develop healthy and sustainable places and communities

3.4 In addition, to reflect the commissioning and performance role of the Shadow Health & Wellbeing Board it is proposed that a Performance & Commissioning Group be established. Their remit will be to:

- Review Tees contracts to ensure they are delivering what is needed for Hartlepool;
- Assist the identification of commissioning priorities for partners including the Clinical Commissioning Group (CCG);
- Monitor performance across the Health & Wellbeing Strategy and the Public Health and Adult Social Care Outcome Frameworks;
- Escalate strategic areas of concern to the Shadow Health & Wellbeing Board for further consideration e.g. Immunisation rates.

3.5 The proposed structure, reflecting the cross cutting nature of the public health outcomes framework, is outlined in Appendix A. Appendix B is an initial draft setting out the existing groups and strategies for each of the Marmot policy areas.

4. RECOMMENDATIONS

4.1 The Board is requested to consider and agree the partnership arrangements that sit underneath the Shadow Health & Wellbeing Board and how they will feed in and support the work of the Board.

5. CONTACT OFFICER

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SHADOW HEALTH & WELLBEING BOARD

PERFORMANCE & COMMISSIONING GROUP

GIVE EVERY CHILD THE
BEST START IN LIFE

ENABLE ALL
CHILDREN, YOUNG
PEOPLE & ADULTS TO
MAXIMISE THEIR
CAPABILITIES & HAVE
CONTROL OVER THEIR
LIVES

CREATE FAIR
EMPLOYMENT & GOOD
WORK FOR ALL

ENSURE HEALTHY
STANDARD OF LIVING
FOR ALL

CREATE & DEVELOP
HEALTHY &
SUSTAINABLE PLACES
& COMMUNITIES

STRENGTHEN THE
ROLE & IMPACT OF ALL
HEALTH PREVENTION

* IMPROVING THE UNDER DETERMINANTS OF HEALTH

* HEALTH IMPROVEMENT

* HEALTH PROTECTION

* HEALTHCARE, PUBLIC HEALTH & PREVENTING PREMATURE MORTALITY

Give every child the best start in life	
<u>Strategies & Plans</u> Immunisation Strategy Breastfeeding Strategy Stop Smoking Maternal Action Plan Healthy Schools Teenage Pregnancy Strategy & Action Plan Children's and Young Peoples Plan Child Poverty Strategy CCG Commissioning Plan Public Health Transition Plan Early Intervention Strategy	<u>Current Groups</u> Children's Partnership (Statutory) Teenage Pregnancy Strategy Group 'Be Healthy' Group Immunisation Strategy Group Early Intervention Partnership
Enable all children, young people and adults to maximise their capabilities and have control over their lives	
<u>Strategies & Plans</u> Teenage Pregnancy Strategy & Action Plan Children's and Young Peoples Plan Vision for Adult Social Care in Hartlepool Child Poverty Strategy 14 – 19 Strategy Carers Strategy Mental Health Strategy Housing, Care & Support Strategy Telecare Strategy CCG Commissioning Plan	<u>Current Groups</u> Children's Partnership (Statutory) Teenage Pregnancy Strategy Group Learning Disabilities Partnership Board (Statutory) Safeguarding Children Board (Statutory) Safeguarding Vulnerable Adults Board Mental Health Consultation Group Carers Strategy Group Champions of Older Lifestyles Group Teesside Vulnerable Adults Board 50+ Forum Early Intervention Partnership Housing Care & Support Group Long Term Conditions Planning Group

Create fair employment and good work for all	
<u>Strategies & Plans</u> Economic Regeneration Strategy 14 – 19 Strategy	<u>Current Groups</u> Economic Regeneration Forum
Ensure healthy standard of living for all	
<u>Strategies & Plans</u> Child Poverty Strategy	<u>Current Groups</u> Children's Partnership (Statutory)
Create and develop healthy and sustainable places and communities	
<u>Strategies & Plans</u> Housing Strategy Housing, Care & Support Strategy Fuel Poverty Strategy Public Health Transition Plan Crime & Disorder Strategy Local Transport Plan	<u>Current Groups</u> Housing Partnership Safer Hartlepool Partnership

Strengthen the role and impact of ill health prevention	
<u>Strategies & Plans</u> Immunisation Strategy Alcohol Harm Reduction Strategy Stop Smoking Action Plan Tobacco Alliance Plan Cardiovascular Disease Programme Plan National Early Detection & Awareness of Cancer Plan Flu Plan (seasonal) CCG Commissioning Plan Public Health Transition Plan Breastfeeding Strategy Healthy Schools Healthy Weight, Healthy Lives Strategy Vision for Adult Social Care in Hartlepool Mental Health Strategy Drug Treatment Plan	<u>Current Groups</u> Immunisation Strategy Group Coronary Heart Disease Local Implementation Team Diabetes LIT British Heart Foundation Group 'Be Healthy' Groups

SHADOW HEALTH AND WELLBEING BOARD REPORT



Report of: Director of Public Health

Subject: DEVELOPING A COMMUNICATION &
ENGAGEMENT STRATEGY FOR THE SHADOW
HEALTH & WELLBEING BOARD

1. PURPOSE OF REPORT

- 1.1 To consider and agree to the preparation of a Communication and Engagement Strategy for the Shadow Health & Wellbeing Board.

2. BACKGROUND

- 2.1 As the Shadow Health & Wellbeing Board develops into the statutory Board there will be a need to communicate and engage with the public, key partners and the Voluntary & Community Sector (VCS). The purpose of the Strategy will be to establish how the Board will:

- Inform people about the role of the new Board;
- Promote the work of the Board including the ways in which this will be communicated to the wider public;
- Engage with members of the public, key partners and the VCS so that they will be able to contribute to the work of the Board.

3. DEVELOPING THE STRATEGY

- 3.1 It is proposed that a small sub group be established to prepare the Communication & Engagement Strategy. In order to assist in the preparation of the Strategy it is also proposed that all partners provide details of their current communication and engagement mechanisms so that, where possible, existing mechanisms are utilised and duplication is avoided. In order to implement the Strategy an action plan will also be prepared.
- 3.2 It is proposed that a draft Strategy and Action Plan be prepared for the Board to consider at the September meeting.

4. RECOMMENDATIONS

- 4.1 The Board is requested to consider and agree to prepare a Communication and Engagement Strategy. Board Members are also requested to identify if they would like to be included in the sub group who will prepare the Strategy and action plan.

5. CONTACT OFFICER

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Date	Time	Item Number	Agenda	Venue	Comments
30-Jul-12	10am		Presentation by Tees, Esk and Wear Valley NHS Foundation Trust	Civic Centre	Deadline 19 July
			Mental Health Prevention Issues - Including MIND	Victoria Road	
			Alcohol Strategy		
			Presentation on NHS Changes – Chief Executive, NHS Tees		
10-Sep-12			Cold weather Plan/Excess Winter Deaths		Deadline 30 August
			CCG Authorisation Process		
			Life Expectancy - comparison of health profiles		
			Health and Housing		
22-Oct-12			SEN Pathfinder		Deadline 11 October
10-Dec-12					Deadline 29 November
28-Jan-13					Deadline 17 January
11-Mar-13					Deadline 28 February
22-Apr-13					Deadline 11 April