

Shadow Health and Wellbeing Board

Minutes of the Meeting held on Thursday, 18th October, 2012 at 2.00 pm in Oak Room - Woodlands Conference Centre

Present:

Chair

County Councillor Mrs Val Wilson, Cabinet Member for Health and Wellbeing (LCC)

Committee Members

County Councillor Mike Calvert, Cabinet Member for Adult and Community Services (LCC)
County Councillor Mrs Susie Charles, Cabinet Member for Children and Schools (LCC)
Richard Jones, Executive Director for Adult and Community Services (LCC)
Helen Denton, Executive Director for Children and Young People (LCC)
Maggi Morris, Director of Public Health (LCC / PCT)
Dr Simon Frampton, West Lancashire Clinical Commissioning Group (CCG)
Dr Jimmy Reid, Fylde and Wyre Clinical Commissioning Group (CCG)
Peter Kenyon, Chair of Lancashire PCT Cluster Board
Janet Soo-Chung, Chief Executive of Lancashire PCT Cluster Board
Councillor Julie Cooper, East Lancashire District Councils
Councillor Bridget Hilton, Central Lancashire District Councils
Councillor Cheryl Little, Fylde District Councils
Lorraine Norris, Lancashire District Councils (Preston City Council)
Michael Wedgeworth, Chair of Third Sector Lancashire
Walter D Park, Chair of Lancashire LINK
Karen Partington, Chief Executive of Lancashire Teaching Hospitals Foundation Trust
Dave Tomlinson, Finance Director - Lancashire Care NHS Foundation Trust

Officers

Sakthi Karunanithi, Director of Population Healthcare, Public Health Lancashire
Mike Leaf, Director of Health Improvement, Public Health Lancashire
Habib Patel, Lancashire County Council

Apologies

Dr Peter Williams, East Lancashire Clinical Commissioning Group (CCG)
Dr David Wrigley, Lancaster Clinical Commissioning Group (CCG)
Dr Robert Bennett, Chorley and South Ribble Clinical Commissioning Group (CCG)
Dr Ann Bowman, Greater Preston Clinical Commissioning Group (CCG)
Deborah Harkins, Director of Health Protection and Policy, Public Health Lancashire

1. Apologies for absence

Apologies for absence were received from Dr Peter Williams, Dr David Wrigley, Dr Bob Bennett and Dr Ann Bowman. Professor Heather Tierney-Moore submitted apologies with Dave Tomlinson attending in her place as a substitute.

2. Minutes of the meeting held on 4 September 2012

Resolved: The minutes of the Board meeting held on 4 September 2012 were agreed as correct.

3. Role and Function of the Shadow Health and Wellbeing Board

Habib Patel, Lancashire County Council, gave a presentation on the Role and Function of the Shadow Health and Wellbeing Board and the Strategy and Interventions, therefore Items 3 and 4 were considered together as a joint item.

Habib recapped what the Board brief to date has been:

Statutory Responsibilities:

- To undertake a Joint Strategic Needs Assessment (JSNA) of health and social care needs.
- To use the JSNA to develop a joint high-level Health and Wellbeing Strategy ensuring public involvement in its development.
- To co-ordinate NHS, social care and public health commissioning plans.
- To promote integration between the NHS, public health and social care.

The Board also included:

- Hold to account (performance manage).
- Voice on behalf of the people of Lancashire on Health & Wellbeing related issues.

Habib stated that the next stage for the Board is to make the shift from the "thinking" stage to the "doing" stage.

Habib discussed the Health and Wellbeing Strategy for 2012 – 2020 and explained that criteria from the Strategy has been used to assess the 10 Interventions that the Board chose to target. Meetings have taken place since the last Board meeting with individuals to discuss which of the 10 Interventions chosen would be selected as the main Interventions for the Board to initially focus on. From this the following four Interventions were chosen:

- Loneliness in older people
- Support for Carers
- Affordable Warmth
- Early response to domestic violence

The next stage for all partners is to look at their ways of working and determine what they can put forward, or offer, to support how the Board can make a difference to the four chosen Interventions.

Habib also stated that the outcomes for the Board to achieve by January 2013 are:

- To ensure the role, function and leadership of the Board is understood by Board members (in the context of delivery of the strategy).

- To ensure that Board members understand and are committed to the Health and Wellbeing strategy (what contribution the sector you represent will make and what contribution your organisation will make).
- To ensure that the Health and Wellbeing interventions are underway and are delivering early results, (again what contribution board members will make to their success).

Habib also discussed the next steps for the Board as follows:

- Dialogue with Board members to take place during December 2012 to discuss:
 - Leadership role in the delivery of the strategy
 - Understanding of role & responsibility
 - Commitment from your sector/organisation
 - Strategy
 - H&WB interventions
 - Commitment to holding the system to account

Board members discussed and clarified what they see as their individual roles on the Board. Board members made some comments regarding work that is taking place to align District Council functions to the Health and Wellbeing Strategy which the Board welcomed.

Board members also discussed what they would like to see included in the discussions scheduled to take place in December and how this will shape the direction of the Board going forward:

- Clear links between Commissioning Plans and the Boards Health and Wellbeing Strategy.
- Utilising the various skills mix of the Board.
- Assessment of needs and targeting of support where needed.
- How the Board aligns itself around the four chosen Interventions.
- Move from high level documentation to specific detail about each Intervention and how the Board is making a difference.
- Move towards action that the Board can see is taking effect.

Resolved: The Board noted the presentation, agreed to support the four chosen Interventions as detailed and welcomed the opportunity to engage in further dialogue through a series of individual meetings to be held in December 2012.

4. Strategy and Interventions

This item was considered jointly with Item 3.

5. Shadow Health and Wellbeing Board Conference - 16th November 2012

Habib Patel presented the report (circulated) outlining the proposals for the Shadow Health and Wellbeing Board Conference to be held on 16th November 2012.

It was noted by the Board that the Police and Crime Commissioner elections are also taking place on 16th November 2012 which will have an impact on District Council Chief Executives and other staff as they will be required to manage the voting that takes place,

this may have an impact on the availability of officers from the District Councils attending the Conference. The Board noted the comment raised.

Resolved: The Shadow Health and Wellbeing Board discussed the proposal and agreed to the format and content of the event as circulated in the report.

6. Health and Social Care Reform 2012 - Update report

Janet Soo-Chung, Chief Executive – NHS Lancashire, presented the report (circulated).

Janet gave an update on the implementation of the Health and Social Care Act 2012 and provided updates on the following:

NHS Commissioning Board

The NHS Commissioning Board has been set up. The overarching role of the Commissioning Board is to ensure that the NHS delivers better outcomes for patients within its available resources. Its responsibilities will include supporting, developing and holding to account an effective and comprehensive system of clinical commissioning groups. The Board will ensure that the new system architecture is cohesive, coordinated and efficient.

The Board has is now in place and has been recruiting to its structure for some months beginning with Director level appointments to the nine Directorates. This national machinery is supported by four sub-national regions and a network of 27 local offices.

The Local Area Office for Lancashire will sit within the North of England region and is similar to the current configuration of the PCT Cluster (IJHS Lancashire) and the SHA North. It was noted that Richard Barker has been appointed as the Regional Director for the North of England.

A number of key appointments at functional Director level have been confirmed in the last two weeks as follows:

- Medical Director Dr Jim Gardner
- Finance Director John Critchley
- Director of Commissioning Martin Clayton
- Director of Operations and Delivery Jane Higgs

The post of Director of Nursing is currently out to advert and an appointment is expected by the end of October.

Each Local Area will be responsible for the direct commissioning of primary care services, performance management of the Lancashire local health system by holding Clinical Commissioning Groups to account and a range of specialised NHS services. In the case of the Lancashire Local Area Team, it will take on the lead role for commissioning health services for Offenders for the whole of the North West.

It is envisaged that the Local Area Office will be based in Preston which has good transport links to the rest of Lancashire and is more convenient for enhancing the

opportunities for more integrated working with partner organisations. Approximately 80 staff are expected to be based in the Local Area Office and posts are currently being filled.

Clinical Commissioning Groups (CCGs)

The eight CCGs (six of which fall within the County Council's administrative boundaries) are already operating with delegated budgets and are increasingly taking on the day-to-day commissioning and contract management/performance responsibilities on behalf of their local PCTs. This transition will move even faster as 31 March 2013 gets closer.

In order to become a statutory organisation in its own right each CCG has to go through a nationally managed authorisation process between now and 31 March 2013. The content of the authorisation process is built around six domains and has been developed through a wide range of stakeholder involvement including patients, carers, clinicians and partner organisations.

The timetable for assessment has been set out in four waves and all the CCGs across Lancashire have opted for Waves 1-3 which means they will have a decision about their state of readiness and further development needs by 31 January 2013.

Commissioning Support Units (CSU)

A key feature of both the eight CCGs and the NHS Commissioning Board local area office is that the staffing structures will be kept to a minimum and they will be expected to acquire additional services (back office and specialist) from the CSU by way of an agreed contract. The Lancashire CSU has been developing a joint venture approach with Cumbria but this work has now been stopped as the Cumbria CCG has determined to purchase its support service from the North East. This is in line with the decision to include Cumbria within a Local Area Office which comprises Northumbria, Newcastle and Cumbria.

Derek Kitchen has been appointed Managing Director of the Lancashire CSU. Derek has been leading the Staffordshire CSU since 2011 and in his new role he will lead the two CSUs. The two CSUs will remain independent and will be hosted by the NHSCB from 1 April 2013 pending further decisions about their future shape and degree of commercial expertise.

Public Health Lancashire

From 1 April 2013 the responsibility for a range of public health services will transfer to the upper tier local authorities. A Steering Group has been working to ensure that this transition works smoothly and effectively for the last few months.

As yet no appointment has been made to the post of Executive Director of Public Health. However appointments have been made to the three posts which will report directly to this post.

These are:

- Director of Public Health Improvement - Mike Leaf
- Director of Health Policy and Protection - Deborah Harkins
- Director of Population Healthcare - Sakthi Karunanithi

A process of re-shaping and rationalising the structures is now underway to bring the three existing teams across the Lancashire PCTs together with the LCC team into one. A further presentation regarding Public Health Lancashire was also presented at Item 7 during this meeting.

New leadership arrangements through transition

The NHS Chief Executive David Nicholson has written to all NHS Leaders setting out the steps in the transition to the new health and social care system. In the letter he describes arrangements to ensure stability and resilience for the current system through to the new health and care system from April 2013.

This means that anyone appointed to regional and local leadership roles in NHS Commissioning Board will take on responsibility both for teams managing operational delivery in 2012/13 and planning the new system for 2013/14.

The Clinical Commissioning Group Board members commented that work was being undertaken on new pathways and some joint work with the County Council has already been undertaken, for example a project has been running since July regarding Health and Respiratory Issues. A number of other new pathways are also up and running.

Resolved: The Shadow Health and Wellbeing Board noted the report and the progress made to date on the Health and Social Care Reform 2012.

7. Public Health Update

Sakthi Karunanithi, Director of Population Health Care and Mike Leaf, Director of Public Health Improvement gave a presentation on Public Health Lancashire.

Sakthi begin the presentation by talking about the previous Health Care system and how it has changed over the previous years. Sakthi explained that the new Health and Care System from April 2013 will put people and communities at the heart of the system and that the new Public Health Lancashire team will be the middle ring of influence which can directly commission public health services.

There will be Public Health teams in:

- Lancashire County Council
- Public Health England (Cumbria and Lancashire)
- NHS Commissioning Board Local Area Team (pan-Lancashire)

The five main contributions of the team will be:

- To directly commission public health services.
- To provide public health leadership and support to NHS Commissioners, LCC, Districts, the Third Sector and other partners.
- To be the interface between the Health and Wellbeing Board, the District level partnerships and the rest of the health system.

- To develop new relationships with CCGs, NCB LAT, PHE, CSU and LCC Directorates to improve health and well being outcomes.
- To contribute to develop national policies.

Mike continued the presentation by explaining that there will be a "One Team" approach – Local Health – Lancashire Wide.

This will include a number of County wide functions:

- County-wide support services.
- System wide workforce and organisational development for Public Health.
- Enable consistent, co-ordinated, systematic approach to:
 - working with partners
 - Influencing national policy
- Provide critical mass.
- Support delivery of public health in localities.
- Intelligence and knowledge management.
- Health protection.
- Business management, planning and governance.
- Influencing county based wider determinants of health.
- Commissioning of health improvement and wellbeing services.
- Clinical leadership and governance.
- Performance management and improvement.
- Locality development.
- Liaison with LCC Cabinet/ Executive and other LCC Directorates.
- Workforce development and training.
- Communication and marketing.

Mike also explained that Public Health Lancashire will work within Localities:

- By providing Public Health Leadership and support to CCGs, District Level Partnerships and District Councils.
- Multi-disciplinary teams reflecting the three domains of public health (matrix working)
 - Supported by locality staff taking on county-wide areas of responsibility.
- Reflecting health economies.
- Align with Lancashire County Council locality footprints.

Public Health Lancashire will provide new approaches, including:

- Use of assets.
- Integrated commissioning.
- Generic skills with matrix working on public health priorities.
- Greater focus on wider determinants, delivering improved outcomes and reducing inequalities.
- Aligned with the shifts envisaged in the Health and Wellbeing strategy.

Resolved: The Shadow Health and Wellbeing Board noted presentation and progress made regarding Public Health Lancashire.

8. Any Other Urgent Business

None.

9. Date of Next Meeting

The Board noted that the next meeting would be the Shadow Health and Wellbeing Board Conference, to be held on Friday 16th November 2012, starting at 12.45pm at the Gujarat Centre, Preston.

Andy Milroy
Principal Executive Support Officer

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