

Health and Wellbeing Board

Thursday 30 June 2016

PRESENT:

Councillor Mrs Bowyer, in the Chair.

David Bearman – Devon Local Pharmaceutical Committee, Councillor Mrs Beer, Lee Budge - Plymouth Hospitals NHS Trust, Carole Burgoyne, Plymouth City Council, John Clark – Plymouth Community Homes, Peter Edwards - Healthwatch, Tony Fuqua – Community and Voluntary Sector, Nicola James – NEW Devon CCG, Craig McArdle - Plymouth City Council, Councillor McDonald, Laura Nicholas – NEW Devon CCG, Dan O’Toole – Livewell Southwest.

Apologies for absence: Councillor Tuffin, Andy Boulting – Devon and Cornwall Police, Jerry Clough – NEW Devon CCG, Judith Harwood – Plymouth City Council, Alison Hernandez – Police and Crime Commissioner, Ann James – Plymouth Hospitals NHS Trust, Professor Patricia Livsey – Plymouth University, Jo Traynor – Community and Voluntary Sector, Steve Waite – Livewell Southwest

Also in attendance: Ross Jago – Lead Officer, Kristin Barnes – Democratic Support Officer.

The meeting started at 10:00 and finished at 12:10.

Note: At a future meeting, the committee will consider the accuracy of these draft minutes, so they may be subject to change. Please check the minutes of that meeting to confirm whether these minutes have been amended.

32. Confirmation of Chair and Vice Chair

Agreed -

1. the appointment of Councillor Lynda Bowyer as Chair for the municipal year 2016 – 2017;
2. the appointment of Vice-Chair of the Board for the municipal year 2016-2017 be deferred to the next meeting as a number of members were absent.

33. Appointment of Co-opted Representatives

Agreed the following co-opted representatives -

Statutory Co-opted Members

- Carole Burgoyne, Strategic Director for People, Plymouth City Council;
- Kelechi Nnoaham, Director of Public Health;
- Jerry Clough, NEW Devon

- Dr Paul Hardy, NEW Devon Clinical Commissioning Group representative;
- Liz Thomas, NHS England.
- Nick Pennel - Healthwatch

Non-Statutory Co-opted Members

- Tony Fuqua, Community and Voluntary Sector Representative;
- Jo Traynor, Community and Voluntary Sector Representative;
- John Clark, Chief Executive, Plymouth Community Homes;
- Steve Waite, Chief Executive, Plymouth Community Healthcare;
- Ann James, Chief Executive, Plymouth NHS Hospitals Trust;
- David Bearman, Chair, Devon Local Pharmaceutical Committee;
- Professor Patricia Livsey, Plymouth University;
- Chief Superintendent Andy Boulting, Devon and Cornwall Police;
- Alison Hernandez, Devon and Cornwall Police and Crime Commissioner
- Judith Harwood, Assistant Director for Learning and Communities.

34. **Declarations of Interest**

There were no declarations of interest made.

35. **Chairs urgent business**

Ross Jago, Lead Officer, has met with officers supporting the Torbay and Cornwall Health and Wellbeing Boards with a view to facilitating regular meetings between the Chairs of those boards. The intention is for the Chairs to consider strategic issues facing their authorities, for example issues around alcohol. Members were invited to come forward with any issues they would like raised at this level.

The Board received a letter of resignation from Peter Edwards of Healthwatch. The Chair expressed her regret to receive Mr Edwards' resignation and offered thanks on behalf of the Board for all his hard work. Ross Jago confirmed that Nick Pennel will step in to replace Mr Edwards.

36. **Minutes**

Agreed the minutes of the meeting of 28 January 2016.

37. **Questions from the public**

There were no questions from members of the public.

38. **Success Regime**

Nicola James, NEW Devon CCG explained that she would introduce the next 3 items. For clarity, as there had been some amendments to the titles and presentations accompanying the agenda, she explained that;

1. Laura Nicholas, Director of Strategy for the CCG, would present on the Success Regime and Sustainability and Transformation Plan covering Plymouth, Devon and Torbay. This will provide an overall picture of the current situation.
2. Lee Budge, Plymouth Hospitals NHS Trust, would present what is now item 9; “One System, One Aim” this sets out the local Plymouth and Western area response to the Success Regime and what is being put in place locally to deliver recommendations.
3. Craig McArdle, Plymouth City Council, would present item 10, the Integrated Commissioning System Action Plans, demonstrating how they link in and support what is being done in relation to the Success Regime.

Laura Nicholas provided the board with an update as to how the success regime was progressing. It was reported that;

- a) the presentation was a high level overview of the situation at present across the three patches. The CCG and associated health bodies have a clear mandate for integration of services;
- b) the overall aims of the Sustainable Transformation Plan are address health inequalities, improve population health, improve outcomes and meet the increase in demand by working in a more integrated way to provide services at the same or less cost than at present;
- c) the STP was not intended to railroad the work that was already going on in Plymouth to deliver an integrated system for commissioning and delivery. The intention was to make sure the direction of travel was the same for all parties;
- d) the new care model would prioritise prevention, which had previously been overlooked as it did not show immediate quantifiable results. The STP had identified some areas, such as diabetes support, which could yield relatively quick positive results;
- e) primary care was a key plank of the plan. It was important that the infrastructure was in place to support early intervention at a primary care level;
- f) 2016/17 work will be focused on securing improvements in 5 areas;
 - Bed based care
 - Elective Care
 - Procurement
 - Continuing care
 - Agency spend
- g) consultation on next steps would start at the end of July. This would look at the likely impact to community hospitals and the provision of ambulatory care;

- h) there was likely to be a secondary stage of consultation in September regarding acute services.

The main areas of questioning from the board related to the following;

- i) translating plans into action;
- j) keeping a local focus;
- k) future proofing of plans in light of the EU referendum result;
- l) preventing Plymouth's progress from being slowed by other parts of the STP footprint who are not keeping up with the rate of change;
- m) addressing the specific inequalities within Plymouth;
- n) early intervention for children's mental health;
- o) health inequalities for children.

39. **Sustainable Transformation Plan**

In a change to the planned agenda, Lee Budge, Plymouth Hospitals NHS Trust, presented to the board regarding "One System, One Aim" this was introduced as a look at how the Success Regime and Sustainable Transformation Plan would impact at a local level;

- a) the intention was to change behaviour to match the system. One system, One Aim sets out how the NHS intends delivering desirable outcomes for the patient population;
- b) One Aim was about rallying people around a single cause to act as one system;
- c) to achieve this all organisations must follow One Plan, which consisted of One Standard, One Budget, One Workforce and One Infrastructure;
- d) a leadership and governance structure has been agreed overseen by a monthly Systems Development Board with a remit to deliver one aim on system.
- e) One Plan identifies 7 specific priority areas for 2016/17
 - Urgent care
 - Children and Young People
 - Elective Care
 - High cost packages
 - Developing Health and Wellbeing Hubs

- Embed mental health in all priorities and align to the complex needs system
 - Redesign of primary care
- f) measures of success have been identified. There would be a singular approach towards a clear outcome.

Recommendations relevant to this item were agreed by the Board and are recorded under the next item at minute 40.

40. **Integrated Commissioning System Action Plans**

Craig McArdle, Plymouth City Council gave the board a summary of the Integrated Commissioning Action Plans for the next 12 months. It was reported that;

- a) a digital roadmap had been developed for submission alongside the Sustainable Transformation Plan. The aim of the Digital Road Map is to achieve a digital record of care, with all signatories paper free at the point of care by 2020.
- b) The previous year had been successful in terms of integrated health in Plymouth, a number of achievements could be evidenced;
- c) focuses for the Integrated Commissioning Action Plan for Wellbeing include;
- sport and leisure: a sports facility strategy has been commissioned;
 - a vision for Health and Wellbeing Hubs: Testing for the model has begun via workshops with stakeholders;
 - a focus on referral to treatment time and elective care: demand management ensuring sufficient capacity;
 - strengthening primary care.
- d) focuses for the Integrated Commissioning Action Plan for Children and Young People include;
- faster integration of SEN services;
 - supporting permanency for children in care;
 - strengthening in house placement offer;
 - focus on CAHMS.
- e) focuses for the Integrated Commissioning Action Plan for Community include;
- meeting complex needs: by joining up services such as those for alcohol and mental health;
 - new urgent care systems: with a focus on managing discharge and avoiding admissions.
- f) focuses for the Integrated Commissioning Action Plan for Enhanced and Specialist Care include;

- enhanced funding: for nursing, residential care and end of life care to reduce admissions;
- driving up quality;
- managing risk.

The main areas of questioning from the board related to;

- g) integrating social care and school systems to achieve better outcomes for care leavers;
- h) the representation and development of primary care within the plans;
- i) quantifying outcomes.

Agreed that –

1. the Health and Wellbeing Board receive regular updates on the Success Regime and Sustainable Transformation Plan;
2. the Board's challenge, laid down at its inception, of a fully integrated system of population health and wellbeing (commissioning and delivery) is clearly stated as the direction of travel in proposals resulting from the work of the Success Regime;
3. the Success Regime process should describe how Plymouth will receive its fair share of funding; and a timescale for a pace of change to the fair distribution of resource should be provided to the board;
4. the approach of the Digital Roadmap process is aligned to the Boards strategy as expressed through the Plymouth Plan;
5. the local response to the Sustainable Transformation Plan and integrated commissioning action plans are aligned to the objectives set by the Board in the Plymouth Plan;
6. the lack of focus on primary care should be addressed in the Success Regime, Sustainable Transformation Plan and local action plans.

41. **People, Communities and Institutions - Report from Plymouth Growth Board**

Carole Burgoyne, Strategic Director for People, Plymouth City Council, and Kelechi Nnoaham, Director of Public Health, Plymouth City Council, presented the People Communities and Institutions report from the Plymouth Growth Board the board. It was reported that;

- a) the report showed the links between the work of the growth board and the work discussed earlier in the agenda, the agendas of the two boards were becoming interlinked;
- b) the Children and Young People's Partnership has already been aligned to the Health and Wellbeing Board. Further consideration needed to be given to linking the wider partnerships across the system. The lead officer was asked to give consideration to how that could be actioned;
- c) the People, Communities and Institutions Flagship's primary remit was to recognise social inequalities and the relationship between growth and health.

42. **Change of Political Administration - Impact**

Ross Jago, Lead Officer to the Health and Wellbeing Board, gave the Board an update as the impact of the change in political administration;

- a) programme of work had begun to look at a move to a committee system of governance;
- b) members were told they may be approached for their input as part of the consultation process.

43. **Work Programme**

The Board noted the work programme and the following items were added;

- a) the Board will receive regular updates from the Success Regime and the Sustainable Transformation Plan;
- b) the Board will consider the Plan for Sport;
- c) the Board will receive updates regarding Health and Wellbeing Hubs;
- d) the Board will consider Special Educational Needs provision;
- e) the Board will consider Supported Living provision;
- f) the Board to receive Performance Score Cards for Integrated Commissioning;
- g) the Board will consider proposals for the future direction of Mental Health Services;
- h) the Board to receive regular reports form the Adults' and Children's Safeguarding Boards;
- i) NHS England to be invited to present to the board following the publication of the GP Forward View in January.

Members were advised to contact Ross Jago with any further suggestions.

Members agreed to move to next meeting of 22 September 2016 to the end of October when the Plymouth Report will be available.