

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Health and Wellbeing Board**
held on Tuesday, 24th September, 2013 at Committee Suite 1,2 & 3,
Westfields, Middlewich Road, Sandbach CW11 1HZ

PRESENT

Cllr J Clowes (Chairman)

Cllr Rachel Bailey, Cllr A Harewood Dr H Grimbaldeston, J Hawker,
Whitehouse, Dr A Wilson, T Crane and M O'Regan.

Non Voting Member

Cllr S Gardiner.

Councillors in attendance:

Cllrs H Gaddum and B Murphy.

Officers/others in attendance:

M Suarez – Chief Executive

I Puzio - Legal Team Manager - Children Families and Adults

L Butcher – Executive Director Strategic Commissioning

G Kilminster – Corporate Manager Health Improvement

J Wilkes, Head of Clinical Commissioning and Health Outcomes, NHS South
Cheshire CCG

R Walker, Commissioning Manager Carers and Later life CEC

T Butcher, Assistant Director Service Improvement

D Kitchen, Head of Service Cheshire and Merseyside, for the NW Ambulance
Service

Apologies

Dr P Bowen, B Smith and ATonge.

12 MINUTES OF PREVIOUS MEETING

RESOLVED

That the minutes be approved as a correct record.

13 DECLARATIONS OF INTEREST

There were no declarations of interest.

14 PUBLIC SPEAKING TIME/OPEN SESSION

There were no members of the public present wishing to use public
speaking time.

15 URGENT ITEM OF BUSINESS - LEARNING DISABILITY LIFE COURSE PROJECT HIGH LEVEL BUSINESS CASE

The Chairman announced that there would be an item of urgent business to consider at the meeting.

She confirmed that, in accordance with Section 100B (4) (b) of the Local Government Act 1972, she was of the opinion that the item should be considered at the meeting, as a matter of urgency for the reason set out below. It would be dealt with in the public part of the meeting and the reasons would be recorded in the minutes of the meeting.

The reason for urgency was that this was a draft high level business case and was the first of the documentation that must be prepared as part of the Council's TEG & EMB approval process. It would be used to provide an overview of the project and to obtain co-operation from key partners. It was important for the Board to consider the document at this meeting, in order to fit in with other Council and meeting timescales.

It was reported that this was a multi agency project to secure new integrated health and social care pathways for Learning Disabilities.

This project would ensure a major whole system review of Learning Disability and Autism Spectrum Disorder (ASD) support and provision. Work would be carried out with partners to take a whole life (birth to death) view of individual and carer needs, service requirements, and efficient use of the public funding that would secure new integrated pathways of care. It was noted that the project was clearly identified in the Council's three year plan.

The objectives of the project were to review, redesign and commission services for children and adults with learning disabilities to ensure that value for money, person centred care, planning and support meets current and future needs. The project would include a whole system commissioning review of all those who have a learning disability and those with Autistic Spectrum Conditions and the support to them in Cheshire East from birth to end of life. The desired outcomes for people with learning disabilities and their families and carers, once the work of the project has been implemented, together with the measured benefits, were outlined in the draft document.

The Chairman requested regular progress reports on this matter, to enable the Board to monitor finance and expenditure.

RESOLVED

That the content of the Learning Disability Life Course Project High Level Business Case be noted.

16 NORTH WEST AMBULANCE SERVICE

Tim Butcher, Assistant Director Service Improvement, and Dave Kitchen, Head of Service Cheshire and Merseyside, for the NW Ambulance Service attended the meeting to provide an update in respect of the NW Ambulance Service. They had previously given a presentation at the meeting of the Board on 30 April 2013, where it had been resolved that the NW Ambulance Service be requested to produce a report for consideration at a future meeting of the Health and Wellbeing Board, in respect of the historic position in relation to the service, improvements made to date and how it was proposed to make future improvements to the Service, including an action plan.

A report had been circulated to Board Members, which provided a description of performance in the area over the previous four years, as well as initiatives to support demand management and performance improvement. As the Board had asked for information on the historic trends in emergency activity and performance, a number of methodological challenges were explained in the report. (A copy of the detailed report has been published on the Council's website, as a supplementary document to these minutes).

Members of the Board asked a number of questions and raised the following issues :-

- The need to address the impact of the increase of specialist care being provided in North Staffs, rather than Eastern Cheshire. This also needed to be relayed to the public.
- It was noted that a major public awareness campaign was due to be launched on 30 September in relation to the correct use of ambulances. The need to effectively play into Local Integration Programmes - It was noted that local managers attended Local Integration Programme meetings and it was recognised that the service needed to be adapted to fit local needs.
- The fact that there is a large population in Eastern Cheshire and a lot more people would be affected if targets were not met should be highlighted.
- That information regarding relative journeys and cost be included in future reports.
- The need for an increase in community responders locally, particularly in rural areas – It was noted that it was proposed to look at growing some of the community responder schemes and the provision of community based paramedics. It was also suggested that the Ambulance Service liaise with Healthwatch to see if they could assist with this issue.

17 BEST PRACTICE DEMENTIA CARE - UPDATE

Jacki Wilkes, Head of Clinical Commissioning and Health Outcomes, NHS South Cheshire CCG and Rob Walker, Commissioning Manager Carers and Later life CEC, attended the meeting and presented a report in respect of Best Practice Dementia Care, including progress to date.

It was reported that the Joint Commissioning Leadership Team had identified best practice dementia care as a key priority, the high level outcomes being Improved awareness and timely diagnosis, increased support for patients and carers (including the right care package and treatment), appropriate support when care needed to change and preparing for and support in end of life care. There was an established strategy which now required updating and individual organisational groups developing and delivering aspects of care would need to be aligned to optimise outcomes for patients and their carers.

Appendix 1 of the report provided an initial draft of a Best Practice Dementia plan, with grouped Initiatives, aiming to capture and address a life course approach to best practice care: Focus was on Early diagnosis; living with dementia and end of life care.

It was reported that the next steps would be to establish a health economy project group to lead the delivery of a new integrated strategy for best practice dementia care; agree terms of reference and membership of the group; agree projects and timescales and measures of success, at a stakeholder event scheduled for 7 November; oversee and support the delivery of the RVS pilot to inform future commissioning plans and establish timescales for delivery of end of life service pilot.

It was noted that it was proposed to work with local Hospices and the two area CCGs and to use the telehealth service to help to support people in their own homes.

The Board was requested to receive the report and comment on the proposed next steps, to ensure that the Health and Wellbeing Board focuses upon the priorities contained within the Health and Wellbeing Strategy and has in place a mechanism for delivering outcomes on the ground.

RESOLVED

1. That the report be received.
2. In considering the report the Board agreed that they would like to see indication as to how the Strategy would be measured against outcomes, in order to qualify and quantify the use of resources. It was also noted that there was already a strong Living Well/Dying Well Strategy in place and that the good work already carried out in this regard should be made use of.

18 NHS SOUTH CHESHIRE CCG ANNUAL PLAN AND PROSPECTUS

Consideration was given to a report relating to the NHS South Cheshire CCG Annual Plan & Prospectus for 2013/14. The report provided an overview of the CCG and its plans for the financial year. It described the standards that local people could expect from the services that the CCG was commissioning on their behalf and a high level description of how the budget for these services would be spent, how it would work with key partners to address health inequalities and importantly, how the local population's views had been and would continue to be heard and reflected in its plans.

In determining its programme of work and projects for 2013-14, the CCG had listened to local people about what was important to them in terms of health services, looked at the Joint Strategic Needs Assessment (JSNA), and reviewed the health inequalities of the local population and other health evidence sources. The CCG had also worked with partners on the Health and Wellbeing Board, provider organisations and the voluntary sector, to consider the key challenges that together they needed to address to make a real difference to the health and wellbeing of its communities over the coming year.

It had aligned its priorities under three Strategic Programmes, which would bring clarity to its work and projects and also aligned with the Joint Health and Wellbeing Strategy, the Starting Well Programme, the Living Well Programme and the Ageing Well Programme. It took responsibility to commission high quality and safe care and in order to improve the quality of service and care, focused on four areas of quality (CASE):- Care, Accessibility, Safety and Effectiveness.

It was noted that it would be important to keep a track on progress and outcomes and it was agreed that updates would be provided through the existing reporting mechanisms.

RESOLVED

That the CCG Annual Plan and Prospectus for 2013-14 be noted.

19 PIONEER BID PRESENTATION

It was reported that health partners have been successful in being shortlisted, following a nationwide call for "Pioneer Bids" from the Department of Health. In May 2013 the Department of Health had invited expressions of interest for Health and Social Care 'Pioneers'. The intention was that 10 'Pioneer Sites' would be selected as a means of rewarding change at scale and pace, from which the rest of the country could benefit. The DoH were looking for Pioneers that would work across the whole of their local health, public health and social care systems and alongside other local authority departments and voluntary organisations, as

necessary, to achieve and demonstrate the scale of change that was required.

Responding to this call, Cheshire East Council, Cheshire West and Chester Council and the four Cheshire Clinical Commissioning Groups had worked together to propose a model for Cheshire-wide integration of Health and Social care.

The partners had been successful in being short-listed and in the previous week, a team including representatives from the CCGs and the Council's Executive Director of Strategic Commissioning had visited the Department of Health, in London, to be interviewed as part of the Pioneer Bid.

Simon Whitehouse gave a short presentation, summarising the bid and showed the film which had been included in the bid presentation, in London.

Final results would be known by the beginning of November.

The Chairman thanked Simon Whitehouse for his presentation and also thanked Councillor Brenda Dowding, Adult Social Care and Health Portfolio Holder for Cheshire West and Chester Council, who was present at the meeting, for her Council's contribution to the bid.

20 PARTNERSHIP BOARDS FEEDBACK

Jerry Hawker provided an update from the Caring Together Partnership Board. The Caring Together Programme was a whole system transformation programme designed to raise the standards and experience of care in Eastern Cheshire, whilst also addressing the significant financial challenges being experienced across the local economy. The Caring Together programme was part of the Pioneer bid and the ambition to integrated care, but also addressed wider challenges in the redesign of acute and specialist services. A Strategic Outline Case has been completed, which outlined the "case for change" and three main priority areas; joining up health and social care, redesigning acute services and increasing efficiency and productivity. Commencing from the 19th September, the statutory bodies represented on the Caring Together Partnership board were presenting the findings of the Strategic Outline case to their Governing bodies/Cabinet.

It was reported that things were progressing well at South Cheshire CCG. A workshop was due to take place on the following day, which was planned to deliver an action plan for the Partnership Board, around co-ordinated care. There were a number of work streams to be considered, along the lines of a vision of the model of care, taking issues forward, leadership of the change, finance and contracting.

The meeting commenced at 2.00 pm and concluded at 4.05 pm

Councillor J Clowes (Chairman)