

OXFORDSHIRE HEALTH & WELLBEING BOARD

OUTCOMES of the meeting held on Thursday, 16 July 2015 commencing at 2.00 pm and finishing at 4.25 pm

Present:

Board Members: Councillor Ian Hudspeth – in the Chair

Dr Joe McManners (Vice-Chairman)
 Councillor Anna Badcock
 Eddie Duller
 Councillor Mrs Judith Heathcoat
 John Jackson
 Dr Jonathan McWilliam
 Dr Paul Park
 Councillor Melinda Tilley
 City Councillor Ed Turner
 Hannah Farncombe (In place of Jim Leivers)
 James Drury (In place of Rachel Pearce)

Other Persons in Attendance: Diane Hedges, CCG

Officers:

Whole of meeting Julie Dean, OCC

Part of meeting Peter Clark, OCC

These notes indicate the outcomes of this meeting and those responsible for taking the agreed action. For background documentation please refer to the agenda and supporting papers available on the Council's web site (www.oxfordshire.gov.uk.)

If you have a query please contact Julie Dean, Tel: (01865) 815322 (julie.dean@oxfordshire.gov.uk)

	ACTION
1 Welcome by Chairman, Councillor Ian Hudspeth (Agenda No. 1)	
The Chairman extended a welcome to new members of the Board, Cllr Anna Badcock and Mr Eddie Duller. He also	

welcomed Rosie Rowe and Julie Dandridge (CCG) who attended for Agenda Item 11 and Sula Wiltshire (CCG) and Seona Douglas (OCC) who attended for Agenda Item 13.	
2 Apologies for Absence and Temporary Appointments (Agenda No. 2)	
Apologies were received from Joanna Simons, Cllr Hilary Hibbert – Biles (OCC) and Dr Matthew Gaw (CCG). Diane Hedges attended for David Smith (CCG), James Drury for Rachel Pearce (NHS England) and Hannah Farncombe for Jim Leivers (OCC).	Andrea Newman
3 Declarations of Interest - see guidance note opposite (Agenda No. 3)	
There were no declarations of interest.	Andrea Newman
4 Petitions and Public Address (Agenda No. 4)	
There were no requests to submit a petition or to make an address.	Andrea Newman
5 Note of Decisions of Last Meeting (Agenda No. 5)	
The note of the meeting held on 5 March 2015 was approved and signed as a correct record.	Julie Dean
In response to a query from a member of the Board, it was reported that the Primary Care Strategy on the expansion of practices and the joining up of the workforce element would be brought to the next meeting on 5 November for discussion.	Julie Dean
In relation to Item 10 – ‘Healthwatch Oxfordshire Report – Summary of Outcomes/Responses’ - Healthwatch Oxfordshire had reported at the last meeting that the CCG had agreed to meet with My Life My Choice to progress improvement on the take up of health checks for people with a learning disability. Eddie Duller reported that the meeting had taken place and My Life My Choice were awaiting confirmation from the CCG of the next steps.	David Smith

<p>6 Implications of the Chancellor's Budget (Agenda No. 6)</p>	
<p>John Jackson made the following observations on the 8 July Chancellor's Budget Statement, commenting that it would be the spending review expected in October/early November which would be of the utmost importance:</p> <ul style="list-style-type: none"> • No details were yet known on the announcement made that there would be a reduction in funding for Public Health. • The announced increases in the national living wage would have a minimal impact on employees in Oxfordshire as most health care providers were already paying more than the minimum wage. • There could be a significant impact on the Oxfordshire health care sector workforce if employees in the retail sector were to be paid more as a result of the changes in tax credits. <p>Dr McManners commented that the CCG would find it very useful if the Board was to have a round table discussion on the subject of key worker housing.</p> <p>Cllr Turner reported that the Health Improvement Partnership Board had already taken on an oversight of the challenges to be faced by the Government's withdrawal of Housing Benefit for 18 – 21 year olds and for larger families, including the impact it would have on the homeless pathways.</p> <p>He also asked Dr McManners whether the announcement of more public sector pay restraints would cause significant challenges for the recruitment and retention of staff. He responded that it was difficult to know at this stage and the CCG were planning forward in order to understand the scale of the problem.</p> <p>It was AGREED to thank John Jackson for the report and to ask for a full report on workforce issues to be presented to the 5 November meeting.</p>	<p>John Jackson</p>
<p>7 Director of Public Health's Annual Report (Agenda No. 7)</p>	
<p>The Director of Public Health gave a presentation on his independent report (HWB7) which was for all organisations and individuals. It summarised the key issues associated with public health in the county and included details of progress over the past year, as well as recommendations for future work.</p>	

<p>The Board also had before them, included on the Addenda to the meeting, the comments of the Oxfordshire Health Overview & Scrutiny Committee from their meeting on 2 July.</p> <p>The Board discussed the need for organisations to accept a collective responsibility to promote the need to plan early for the proper inclusion of health services in individually planned developments within the district councils. Due consideration would also have to be made to the limited financial pot however. John Jackson undertook to lead on this, in his capacity as the CCG's Director of Strategy & Transformation. In addition, the Board agreed that there was also a role for other organisations such as the Local Enterprise Partnership and the Growth Board to play in this. The Board therefore AGREED that all organisations should take a collective responsibility to ensure that appropriate Health provision was included into housing developments where possible and appropriate and that there should be regular updates on action taken to address this.</p> <p>In addition, the Board AGREED to RECOMMEND that the Oxfordshire Joint Health Overview & Scrutiny Committee scrutinise the role of prevention of obesity, focusing on the collective roles of the district councils, the clinicians and on public health.</p> <p>It was AGREED to thank Dr McWilliam for his excellent report and to agree all the recommendations contained within the report which were for the Board.</p>	<p>John Jackson</p> <p>Jonathan McWilliam/Claire Phillips/Julie Dean</p> <p>Jonathan McWilliam</p>
<p>8 Healthwatch Oxfordshire Report and Summary of Responses to Quality Accounts (Agenda No. 8)</p>	
<p>Eddie Duller and Rachel Coney (Chair and Chief Executive of Healthwatch Oxfordshire (HWO), respectively) introduced the Healthwatch Oxfordshire update (HWB8) which also summarised the responses made by HWO to the Quality Accounts produced by providers in Oxfordshire for 2015/16. It also provided the Board with an overview, from the HWO perspective, of the quality issues that need to be addressed in the local health economy in the year ahead.</p> <p>Members of the Board welcomed the summary as prepared by HWO much of which was a useful addition the draft Health & Wellbeing Strategy.</p> <p>Diane Hedges commented that this was a fair representation of the challenges facing Health in Oxfordshire, adding that there had</p>	

<p>been a recognition that some improvements had been made in Quality issues but that there was no complacency on the part of the CCG.</p> <p>Cllr Tilley asked if HWO were going to be focusing on children's issues during the latter half of this year. Rachel Coney responded that the HWO Board was due to consider their forward plan at the end of July. She also informed the Board that the fieldwork for their project on national dignity of care standards was due to end by the end of July and that they would be sharing their findings in early September.</p> <p>It was AGREED to note the report.</p>	<p>Eddie Duller/Rachel Coney</p>
<p>9 Performance Report for 2014 - 15 - final report on last year's outcomes (Agenda No. 9)</p>	
<p>The Board reviewed the final report of performance against last year's outcomes as set out in the Health & Wellbeing Strategy 2014/15 (HWB9). Dr McWilliam pointed out that revised outcomes had been included within the draft revised Strategy at Agenda Item 10. He reported an error in 5.7 'Increase the employment rate amongst people with mental illness from a baseline of 9.9% in 2013/14 ' – the 'Actual' statistic was corrected from 16% to 9.6% thus turning the colour from green to amber.</p> <p>It was AGREED to note the report.</p>	<p>Jonathan McWilliam/Ben Threadgold</p>
<p>10 Revised Joint Health & Wellbeing Strategy and proposed Performance Framework for 2015-16 (Agenda No. 10)</p>	
<p>Dr McWilliam introduced the revised Joint Health & Wellbeing Strategy and proposed Performance Framework for 2015/16 (HWB10) for consideration by the Board. Dr McWilliam directed the Board's attention to the comments of the Oxfordshire Joint Health & Overview Scrutiny Committee on 2 July which had been included on the Addenda.</p> <p>The following points were raised by members of the Board during the discussion:</p> <ul style="list-style-type: none"> - the strong focus on the provision of sport in schools in relation to priority1 was welcomed; 	

<ul style="list-style-type: none"> - In response to a query in relation to priority 4.1 - 'improving the free school meals gap at all key stages and aim to be in line with the national average by 2015', Hannah Farncombe explained that the Deputy Director for Children's Services had devised a new strategy for working with schools, with the aim of driving up achievement and attainment and refreshing the school improvement programme; - In response to a request that a target be included to identify child carers within the county, John Jackson responded that the new Care Act had introduced a statutory requirement for the identification of carers; - In relation to the stated need for a focus on the development of clinical support to patients, it was explained that the structure predated the recent CCG's structural organisations. It was noted that the inclusion of Health issues would be welcomed as soon as it was possible to do so; - The CCG would be undertaking a piece of work for public engagement on supporting people with management of long term health conditions; - Performance on targets may mask variations in outcomes for different groups of people or locations, and a hope that the Children's Trust and the Older People JMG would keep it in mind. The draft Strategy was a large, overarching document and there was an inevitable tendency to consult on specific pieces of it. - Reassurance was given that the budgetary component would be picked up in a slightly different format in future to take into account monies coming in from the Prime Minister's Challenge Fund, for example. <p>Taking all of the above into account, it was AGREED to approve the revised Health & Wellbeing Strategy for 2015/16.</p>	<p>Jonathan McWilliam/Jackie Wilderspin</p>
<p>11 Primary Care - Implications for Services following award of funding from the Prime Minister's Challenge Fund (Agenda No. 11)</p>	
<p>In September 2014, the Prime Minister announced a second wave of funding amounting to £100m for a Challenge Fund for</p>	

2015/16 to help improve access to general practice and stimulate innovative ways of improving primary care services.

There was a pan-Oxfordshire submission by the three GP Federations covering the County's population. It comprised three complementary sets of interventions to address a patchwork of local need. The aim of the schemes was to enhance patient access to Primary Care (physically and digitally). At the end of March 2015 it was announced that Oxfordshire Federations were successful in securing funding to the sum of £4.9m.

A summary of the schemes approved was set out in the report HWB11 and further information was also available at Appendix A.

Rosie Rowe and Julie Dandridge (CCG) presented the report and made themselves available for questions from the Board.

When asked if there had been a noticeable difference in respect of those schemes which started in June, Dr Park responded that to date they were running very successfully and were freeing up time for GPs to see their patients with more complex conditions. Rosie Rowe pointed out that the CCG were currently designing an independent evaluation plan for Oxford University to deliver to ensure that investment was concentrating on the key issues.

Rosie Rowe was asked what would happen after the one year funding ran out. She explained that the reason for conducting the independent evaluation of the outcomes was to know about the overall impact the scheme had on individual parts of the system and what was successful and what was not. It would also enable GPs to try working in different ways using new models of care.

Rosie Rowe was asked about progress in Oxford City. She reported that progress had been good, particularly within the new GP Federation. The early visiting scheme had been provided using practice nurses. The Federation was also working with Oxford Health and the GP Out of Hours Scheme to enable full patient records to be seen in order to assess risk more accurately. They were also looking to roll out an online website.

Eddie Duller asked if the evaluation of the pilot schemes would include public opinion on whether the new systems were an improvement or not. Rosie Rowe responded that the CCG would be asking patients to comment on their experiences and that Oxford University would be discussing that with HWO.

The Board hoped that any savings could be evaluated and then used to enable the pilot services to run on after the funds had run out.

<p>It was AGREED to:</p> <p>(a) note the progress in mobilisation; and</p> <p>(b) note the plans to evaluate the schemes.</p>	<p>) David Smith/ Rosie Rowe)</p>
<p>12 Better Care Fund plans - Update (Agenda No. 12)</p>	
<p>The Better Care Fund (BCF) plan for Oxfordshire was submitted in January 2015 to NHS England, supported by Swindon CCG, Aylesbury CCG, Oxfordshire County Council and the Chair of the Oxfordshire Health & Wellbeing Board and the main providers in Oxfordshire including the Oxford University Hospitals NHS Trust and the Oxford Health Foundation Trust. The plan commits to protecting adult social care with an investment of £8m and £1.35m to support implementation of the Care Act 2014.</p> <p>Attached at HWB12 was information in relation to the performance element of the plans, together with information on the various initiatives. More comment on future work to be done would be submitted to the 5 November meeting. John Jackson presented the report.</p> <p>Eddie Duller reported that at a recent workshop held by HWO many voluntary organisations had reported that the self - assessment process was not working as well as it could do. John Jackson thanked Mr Duller for this information which would be taken on board, but he had found that 70% of older people had filled in the self - assessment form which was a higher number than expected.</p> <p>Dr McManners commented that there were areas where progress was slower than others. Diane Hedges responded that this tended to appear in areas where one service crossed over into other. She added that there would be a meeting on 29 July to establish whether there was alignment or whether there were issues which needed to be ironed out, for example, in EMU ambulatory care. Information on this would be reported to the next meeting of the Board.</p> <p>It was AGREED to:</p> <p>(a) note the report and that a further progress report would be submitted to the next meeting of this Board on 5 November; and</p>	<p>)))</p>

<p>(b) support the 2% calculation figures as set out above, as part of the Better Care Fund submission to NHS England. This would mean that a further submission would not be required.</p>	<p>John Jackson/Ben Threadgold)</p>
<p>13 Oxfordshire Safeguarding Adults Board (OSAB) - Annual Report 2013/14 (Agenda No. 13)</p>	
<p>The Oxfordshire Safeguarding Adults Board (OSAB) 2013/14 is required to report annually on the work of the Board and of its partners, assessing the position of the partnership in relation to the safeguarding of adults at risk within Oxfordshire.</p> <p>Sula Wiltshire, Vice Chairman of the OSAB and Seona Douglas, Deputy Director for Adult Social Services presented the report on behalf of the Chair of OSAB. It outlined the work of the Board and its partners to safeguard adults at risk within Oxfordshire for the financial year 2013/14. It also covered the main national and local policy changes that occurred in that period (HWB13).</p> <p>Sula Wiltshire apologised for the delay in reporting activities for 2013/14 and undertook to ensure that the 2014/15 report would be presented to the Board by the end of the financial year. She reported that the Board now had a new Chair, Sarah Mitchell, who was due to start in September. She was also the Chair of the Buckinghamshire Board.</p> <p>Sula Wiltshire observed that now that the Board was on a statutory footing, this would assist the Board to strengthen its processes going forward. A joint business unit was also in place to give dedicated office and governance support to the Children’s Safeguarding Services and also to the Adult Services. The first steps would be to work out up to 5 priorities for next year which would be subject to proper performance targets and delivery.</p> <p>It was AGREED to note the OSAB report for 2013/14.</p>	<p>Sula Wiltshire/Seona Douglas</p>
<p>14 Reports from Sub-Groups (Agenda No. 14)</p>	
<p>The Board had before them written reports on activities since the last full Board meeting from the Children’s Trust, the Older People Joint Management Group and the Health Improvement Partnership Board (HWB14).</p> <p>It was AGREED to note the reports.</p>	<p>All to note</p>

<p>15 The Children & Young People's Plan (Agenda No. 15)</p>	
<p>Members of the Board were given a presentation on the draft Children & Young People's Plan (HWB15) aided by three young people who had had some involvement in its production.</p> <p>The Board thanked the young people for their part in giving both theirs and other young people's very valuable viewpoints in relation to a wide number of issues, and for all their hard work in the production of the Plan.</p> <p>Hannah Farncombe spoke of the importance of building good relationships of trust between children and young people and partner organisations such as the Police, social workers, health workers, teachers etc, adding that this leads to a sense of safety, security, receiving a better education and better health.</p> <p>It was AGREED to accept the Children & Young People's Plan.</p>	<p>Jim Leivers/Hannah Farncombe</p>
<p>16 PAPERS FOR INFORMATION ONLY (Agenda No. 16)</p>	
<p>The Board received a summary of correspondence with the Chairman (HWB16).</p>	

..... in the Chair

Date of signing