At a meeting of the Health and Wellbeing Board held on Thursday, 20 March 2014

Present (Voting)
Councillor Pearson (Chair) Cabinet Member, Adult Social Care and Health, St Helens Council
Councillor Cross Cabinet Member, Public Health & Wellbeing, St Helens Council
Dr Steve Cox Clinical Accountable Officer, St Helens CCG
Andy Dempsey Director of Children and Young Peoples’ Services, St Helens Council
Liz Gaulton Director of Public Health, St Helens Council
Carole Hudson Chief Executive, St Helens Council
Peter Hughes Acting Director of Adult Social Care & Health, St Helens Council
Bill Guest Chair, St Helens CCG
Tom Hughes Chair, Healthwatch
Councillor Murphy Cabinet Member, Schools and Lifelong Learning and Statutory Lead for Children’s Services, St Helens Council

(Participating Non-voting)
Dr Kate Fallon Chief Executive, Bridgewater Community Healthcare NHS Trust
Ann Marr Chief Executive, St Helens and Knowsley Hospital Trust
Dr Louise Sell Medical Director, 5 Borough Partnerships
Sally Yeoman Chief Executive, Halton and St Helens VCA
Rob Young Chief Executive, Helena Partnerships

Also Present
Debbie East Administration and Volunteer Support Officer, Healthwatch
Melanie Sirotkin Centre Director, Cheshire and Merseyside Public Health
Leigh Thompson-Head of Assurance & Delivery, NHS England, Merseyside
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63 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Almond, Dr Kevin Hardy, Sarah Johnson, Johanna Riley, Ian Stewardson and Mike Wyatt.

64 MINUTES

* Minutes of the meeting held on 23 January 2014, were approved and signed as a true record.

65 DECLARATIONS OF INTEREST

<table>
<thead>
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<th>Item</th>
<th>Title</th>
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<td>6</td>
<td>Paediatric Speech and Language Therapy (SALT)</td>
<td>Dr Kate Fallon and Dr Louise Sell</td>
<td>Declared a Pecuniary interest in the item stating they would remain in the meeting but not partake in discussion nor vote upon the matter.</td>
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HEALTH AND WELLBEING BOARD

HEALTH AND WELLBEING BOARD MEMBERSHIP

The Head of Policy and Performance presented a report on the Health and Wellbeing Board Membership.

The Board noted that this was an amended report from that issued with the agenda, which had requested consideration of the proposal to invite the Police and Crime Commissioner to become a Member of the Health and Wellbeing Board.

The amended report was a request for the Board to consider the proposal to invite the Area Commander to become a participating non-voting member of the St Helens Health and Wellbeing Board, in order to strengthen the relationship between community safety and health and wellbeing agenda.

The Terms of Reference – St Helens Health and Wellbeing Board, which contained proposed revised Health and Wellbeing Board Membership, was attached to the revised report at Appendix A.

* Resolved that:

(1) the Area Commander be invited to attend future Health and Wellbeing Committees as a non-voting participating observer; and

(2) the revised Health and Wellbeing Board Membership and Terms of Reference as attached to the report at Appendix A be adopted.

CHESHIRE AND MERSEYSIDE PUBLIC HEALTH ENGLAND (PHE) CENTRE PROSPECTUS

The Centre Director, Cheshire and Merseyside Public Health presented the Cheshire and Merseyside Public Health England (PHE) Centre Prospectus.

The Board was informed that the Public Health England Centre in Cheshire and Merseyside brought together a number of services and statutory functions to deliver advice and support in health protection, health improvement and health care public health.

The Public Health England Cheshire and Merseyside Centre Prospectus 2013/14 was attached to the report at Appendix A and set out the services and functions that PHE Cheshire and Merseyside offered as part of the wider public health system.

* Resolved that the report be noted.

Tom Hughes entered the meeting during discussion on the following item.

PAEDIATRIC SPEECH AND LANGUAGE THERAPY (SALT)

The Clinical Accountable Officer, St Helens CCG presented a report on Paediatric Speech and Language Therapy (SALT).

The Board was informed that through collaborative commissioning partners Knowsley CCG and St Helens CCG, the 5 Boroughs Partnerships NHS Foundation Trust were commissioned to provide specialist Speech and Language Therapy.
Paediatric Speech and Language Therapy had been identified as a priority area at the Children’s Health Summit on 17 October 2013. It was reported to date there had been an increase in demand of 39% in new referrals and activity data showed that some children had been waiting for 10 months to receive SALT post assessment. Concerns about SALT services had also been raised in a variety of other forums including Health and Adult Social Care Scrutiny Panel and the Education Task Force (SEN).

Following the findings from the Children’s Health Summit, the CCG liaised with the provider to work to improve the service. It was reported that whilst this service had shown some small improvements, it still did not provide acceptable access for assessment nor subsequent treatment, which effectively breached 18 weeks.

The report submitted to the Health and Wellbeing Board concluded that existing SALT provision within the borough for children did not meet access for assessment nor treatment targets reporting a 25 week average wait between referral and receipt of a service against a national target of 18 weeks. Concerns were also raised around the lack of a contract specification for the service, appropriate contract and performance monitoring.

The Clinical Accountable Officer gave the Board a verbal update on progress since publication of the agenda; reporting that a short term waiting list had been developed to reduce waiting times and work had begun to develop a Children Services Review which would include infrastructure review.

The Board discussed the item and provision of Children’s Services.

The Chief Executive assured the Board that the Director of Public Health and CCG would look to conduct a joint review Children’s Services, including autism support and tier 2 and 3 Child and Adolescent Mental Health Service (CAMHS), and there was a view to appointing and/or developing a Children’s Services Health Monitoring role.

The Board acknowledged that the Council’s Health and Adult Social Care Overview and Scrutiny Panel Chair was present as an observer at the meeting as Language Therapy Services was part of the Scrutiny Work Programme for 2013/14.

The Guidance on Quality Standards for Local Authorities and Schools as Commissioners of Speech and Language Therapy Service in the UK and Developing Community Therapy Services, Final Summary Report prepared on behalf of CMCSU for St Helens CCG were attached to the report at Appendices A and B respectively.

* Resolved that:

1. the Commissioner acquire the outstanding data requested and submit a contract query as to why the 18 weeks target for referral treatment was unmet;

2. the Commissioner look to urgently develop a new service specification, within the contract with key performance indicators including patient quality and experience timeframes, to meet the SEN and autism pathway requirements;

3. CCG fund and implement a waiting list initiative to ensure that any children waiting 18 weeks or longer are seen;
(4) CCG and Public Health complete a service review within the next six months to include needs assessment, review of current service model, whole systems mapping and design, workforce planning to assist in the development of outcomes focussed service specification for re-procurement;

(5) CCG, Local Authority and Schools identify funding streams to deliver this service model;

(6) the Board recommend that Healthwatch be involved in the Special Education Task Force (SEN); and

(7) a further update report is brought back to the June meeting.

DRAFT PROTOCOL BETWEEN LOCAL SAFEGUARDING CHILDREN’S BOARD AND HEALTH AND WELLBEING BOARD

The Head of Policy and Performance presented the Draft Protocol between Local Safeguarding Children’s Board and Health and Wellbeing Board.

The primary aim of the protocol was to define how the Health and Wellbeing Board (HWB) and Local Safeguarding Children’s Board (LSCB) work together in the pursuit of safeguarding and promoting the welfare of Children and Young People.

Previously the Board had made a commitment to work closely with the Local Safeguarding Children’s Board and Adult Safeguarding Board, the development of the protocol would ensure that safeguarding and child protection were cross cutting themes in all of the Board’s work.

The Chair informed the Board that the Adult Safeguarding Board would become statutory under the Care Bill, and suggested it would be beneficial to develop the protocol with this in mind; as the further development of the protocol between the three bodies would ensure clear governance procedures in place and establish a regular flow of information.

* Resolved that:

   (1) the report be noted;

   (2) the draft protocol between Local Safeguarding Children’s Board and Health and Wellbeing Board be adopted; and

   (3) the protocol be expanded to include the Adult Safeguarding Board.

BETTER CARE FUND - FINAL SUBMISSION

The Acting Director for Adult Social Care and Health presented the report on the Better Care Fund (BCF) final submission.

Following the meeting of this Board held on 23 January 2014, where the draft Better Care Fund, as required for submission on the 14 February 2014, had been approved, work had been on-going to develop a final submission of the Better Care Fund to NHS England.
HEALTH AND WELLBEING BOARD

The final revised version of the Better Care Fund was required for submission to NHS England by 4 April 2014, but would require approval by this Board, CCG Governing Body and the Council’s Cabinet before this date.

It was reported that there had been a number of small changes to the draft version in order to strengthen the submission in terms of risk, particularly to the Acute Sector, together with some refining of the spending plan and a revision of our savings schedule.

The Acting Director for Adult Social Care and Health reported the announcement from Central Government, that the Independent Living Fund (ILF) would close on 31 March 2015, would have a significant impact on the Better Care Fund spending plans. The closure of the ILF would place a strain on Local Authorities who would need to meet care expenses previously supported by this fund.

The Board was informed that following the announced changes to the ILF, the Council and CCG would carry out a detailed piece of work based on their 2014-15 budgets to map out and agree the actual existing spend eligible for inclusion in the BCF from 2015-16.

The Head of Quality Improvement and Patient Safety, NHS Merseyside was present at the meeting and advised the Board on the quality assessment and peer review process.

The final Submission of the St Helens Better Care Fund plan for submission to NHS England was attached to the report at Appendix A and the Outcomes and Metrics – 6 March 2014 pre final submission was tabled for information.

* Resolved that:

(1) the Better Care Fund for submission to NHS England be endorsed; and

(2) the Clinical Accountable Officer, St Helens CCG and the Chief Executive of St Helens Council, in consultation with the Portfolio Lead for Adult Social Care and Health and the Chair of the CCG, be delegated authority to make amendments to the Better Care Fund submission for 4 April should any further guidance and advice be received.

71 ST HELENS PUBLIC HEALTH ANNUAL REPORT 2013 ‘BETTER HEALTH TOGETHER’

The Director of Public Health presented the St Helens Annual Report 2013 ‘Better Health Together’.

It was reported that this was the first Public Health Annual Report (PHAR) since 1974 and that this report had been produced in the style of the earliest medical Officers report for the Borough which dated back to 1873.

The Board was informed that the report focused on joint working and highlighted the work that had taken place during 2013, both within the Council with the public and partners such as the NHS, Education and Voluntary Sector.

The report also contained a summary of key data and analysis which highlighted the challenges faced locally and a range of recommendation to work better together and
achieve better outcomes.

The presentation detailed the following:-

- **Background to the Public Health Annual Report**;
- **Health in St Helens**;
  - Infant Mortality in St Helens 1880 to 2012;
  - Main Causes of Death in St Helens during 1884;
  - Main Causes of Death in St Helens during 2012;
  - Changes over time (1884-2012);
  - Borough Overview 2012-13;
  - Life Expectancy;
  - Life Expectancy by Area;
- **Joint working to Improve Health Locally**;
  - Working Across the Council;
  - Working With Health Care Providers;
  - Working with Local Organisations;
  - Working with the Public ;
  - Working Regionally; and
- **Summary**.

The St Helens Annual Report 2013 ‘Better Health Together’ was attached to the report at Appendix A.

* **Resolved that:**
  
  (1) the findings of the Public Health Annual Report be noted;
  
  (2) the recommendations to improve public health and reduce inequalities included within the Annual Report be endorsed and adopted; and
  
  (3) the Public Health Team be congratulated for all their work and achievements over 2013.

**72 END TO END ASSESSMENT BRIEFING**

The Clinical Accountable Officer, St Helens CCG presented the report on End to End Assessment Briefing.

The Board was informed that an End to End Assessment had been jointly commissioned by NHS Halton, Knowsley, St Helens and Warrington and NHS England which would map health care activity, patient flows, and expenditure by commissioner and location.

The completed assessment would not only support the development of the five year strategy required under ‘Everyone Counts: Planning for patients 2014/105 – 2018-19’ but leave all commissioners with a workable model to support decision making and the development of strategic approaches over the next five years.

The Board was informed that the assessment was due to commence on the 24 February 2014 and would last for a period of seven weeks.
Resolved that:

1. the report be noted; and

2. a report on locality based services to be brought back to the next meeting of this Board; and

3. an update report on findings as a result of the End to End Assessment be brought back to a future meeting of this Board once complete.

73 HEALTH AND WELLBEING PERFORMANCE REPORT

The Area Intelligence and LSP Development Manager presented the Health and Wellbeing Performance Report which was themed around each of the eight Health and Wellbeing Strategic Priorities and presented information on indicators containing new information for the period between October-December 2013.

It was noted that there was no new information to report on for the Mental and Health and Wellbeing for this quarter.

Overall it was reported that 44% of indicators were on or better than target, with good performance being named in a number of areas particular in tackling alcohol misuse and reducing unplanned hospital admission. The Board noted that there were areas where performance had not improved, in particular performance against measures to improve the health and wellbeing of children and young people.

The report also contained a number of proposed revisions to targets, following a review in light of improved baseline and benchmarking information. The revisions were reported as a mix of increases of targets, which would build upon already strong and good performance and reductions of targets so that they remained challenging, but with realistic prospect of attainment.

The Board was informed that performance in each of the eight key areas would continue to be monitored and reported back to this Board as focused reports and action plans on a periodical basis.

The Health and Wellbeing Performance Report for Quarter 3 and Health and Wellbeing Strategy Performance Target Proposals were attached to the report at Appendices A and B respectively.

* Resolved that:

1. the current performance against Health and Wellbeing Strategy performance be noted; and

2. the revised targets as set out in Appendix A be adopted; and

3. A risk profile for underperforming targets be brought back to a future meeting of this Board.
DATE OF NEXT MEETING

Thursday, 19 June 2014, 12.00noon – Room 10, Town Hall.

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