HEALTH AND WELLBEING BOARD

Minutes of the Meeting held on 3rd June, 2014

79. Present:-

Councillor Sir Stephen Houghton (Chairman) - Leader of Barnsley MBC

Councillor Tim Cheetham – Children, Young People and Families Spokesperson

Councillor Jenny Platts – Adults and Communities Spokesperson

Martin Farran – Executive Director, Adults and Communities

Sharon Stoltz - Acting Director of Public Health

Mark Wilkinson - Chief Officer, NHS Barnsley Clinical Commissioning

Carole Lavelle - NHS England

Adrian England – Barnsley Health Watch

Diane Smith - South West Yorkshire Partnership NHS Foundation Trust

Steve Wragg – Barnsley Hospital NHS Foundation Trust

Andy Brooke - South Yorkshire Police

80. <u>Declarations of pecuniary and non pecuniary interests.</u>

There were no declarations of pecuniary or non pecuniary interests.

81. Minutes of the Board Meeting held on 1st April, 2014.

The meeting received the minutes from the previous meeting of the board, held on 1st April, 2014.

RESOLVED:- that the minutes be approved as a true and correct record.

82. Minutes from the Children and Young People's Trust Executive Group, held on 14th March, 2014.

The meeting received the minutes from the Children and Young People's Trust Executive Group, held on 14th March, 2014.

RESOLVED: that the minutes be received.

83. Minutes from the Community Safety Partnership, held on 5th March, 2014.

The meeting received the minutes from the Community Safety Partnership, held on 5th March, 2014.

RESOLVED:- that the minutes be received.

84. Notes from the Anti-Poverty Board, held on 12th May, 2014.

The meeting received the notes from the Anti-Poverty Board, held on 12th May, 2014.

RESOLVED:- that the notes be received.

85. <u>Improving the Health Community Urgent Care Pathway (Emergency</u> Department 4 hour 95% target).

The Chair of Barnsley Hospital NHS Foundation Trust presented the report, noting that since March, 2014 the target had been achieved, and that in May, 2014 the level of performance had reached 98%.

Assurances were made that the trust were giving the issue the attention and investment this required, and that Monitor were pleased with the progress made. Congratulations were expressed at the improvement, acknowledging that the level of performance reflected the work of the whole health system, rather than just the hospital trust.

The meeting noted that the Urgent Care Working Group comprised a number of partners to oversee improvement in this area, and it was suggested that the group provides a more detailed report to a future meeting of the Health and Wellbeing Board.

RESOLVED:- that the Urgent Care Working Group provides a report on the work being progressed in order to improve urgent care pathway performance to a future meeting.

86 Health and Wellbeing Strategy Refresh.

The Health and Wellbeing Development Manager introduced the item, referencing a number of changes made to the draft document.

The meeting heard how the document articulated a shared vision, outcomes for 2014-19, and priorities for 2014-15. The Strategy had been made shorter, more punchy, and redrafted with partners and practitioners in mind as the primary audience.

The document utilised the life-course approach and the following structure:-Analysis; Actions; Assurance. Noted was the mention of finance and medium term financial planning to support the delivery of the shared vision, outcome and priorities over the coming period.

It was acknowledged that the Strategy sets the strategic direction for health and wellbeing in Barnsley, and that commissioner and provider plans should be set within this context, articulating clearly how they contribute to delivery. It was suggested that these documents be electronically embedded into the strategy. The benefits of this included the need for partners to request a change to the embedded version when their strategy was reviewed. This could prompt a discussion between partners around their revised version.

Members noted the references made within the document to the performance management and governance of the strategy.

The meeting discussed the responsibilities and governance of the programme boards and delivery partnerships,, noting that despite what is currently set out in the Strategy document which states they are all directly responsible to the

Health and Wellbeing Board, the CCG have suggested 3 directly reported into the CCG Governing Body. It was suggested that clarity be given in the document about the remit of each programme board and delivery partnerships about governance arrangements.

It was also suggested that more information was required about how the workforce development element of the strategy is to be taken forward. It was noted that plans were in place for the development of a workforce development strategy, based upon the approach taken by the Children and Young People's Trust, and that this would be scheduled for discussion at a future meeting of the Board.

The performance management of the strategy was considered, and it was noted that a small number of measures still required determination due to their nature. Of key importance was the assurance that the achievement of targets and measures in the short term, 2014/15, would ensure enough progress to reach longer term outcomes.

The meeting noted the need to differentiate between the responsibilities of the partnership and programme boards, and those of individual organisations. A suggestion was made that a review of performance management framework, consideration of the alignment of resources and related governance arrangements ought to be considered in more detail.

RESOLVED:-

- (i) that the Health and Wellbeing Strategy be approved in principle and go out for a short consultation, subject the minor amendments detailed above;
- (ii) that, alongside the consultation further work be undertaken to review the governance of the Strategy, performance management and the allocation of resources;

87. Stronger Barnsley Together Portfolio Update.

The meeting received the report for information.

88. Healthwatch Report.

The meeting noted the report, which highlighted progress to date. The meeting heard of the wide variety of partners with which Healthwatch had worked, some of which by utilising their statutory powers. The meeting also heard that a number of new board members had been recruited and had received training, however additional steering group members were still required.

RESOLVED:- that the report be received...

89. <u>Better Health Outcomes for Children and Young People Pledge.</u>

The report was introduced by the Acting Director Public Health, who made the meeting aware that the item had recently been discussed at the Children's Trust.

The aim of the pledge was to give children the best start in life, which was a important part of the Health and Wellbeing Strategy.

Members were keen to ensure that partners not only signed the pledge but also embedded the work within their organisation and within the programme boards. It was agreed that this be subject to appropriate checks and challenge.

RESOLVED:- that the pledge be endorsed, and partners encouraged to adopt and deliver the pledge within their organisation.

90. Hate and Harassment Strategy.

The meeting received the strategy, and heard that the document had been widely consulted on. It was noted that a launch event for the strategy had been arranged to take place on 25th June, 2014.

RESOLVED:- that the report be received.

 Chairman

Council Governance Unit Town Hall, Barnsley

June, 2014.