HEALTH AND WELLBEING BOARD

Minutes of the Meeting held on 18th September, 2014

13. Present:-

Councillor Sir Stephen Houghton (Chairman) – Leader of Barnsley MBC Councillor James Andrews - Deputy Leader of Barnsley MBC Councillor Jenny Platts – Communities Spokesperson Councillor Margaret Bruff – People (Safeguarding) Spokesperson Diana Terris – Chief Executive Martin Farran – Executive Director, Adults and Communities Sharon Stoltz – Acting Director of Public Health Lesley Smith – Interim Chief Officer, NHS Barnsley Clinical Commissioning Group Nick Balac – Chair, NHS Barnsley Clinical Commissioning Group Brian Hughes – NHS England Adrian England – Barnsley Health Watch Sean Rayner – South West Yorkshire Partnership NHS Foundation Trust Diane Wake – Barnsley Hospital NHS Foundation Trust

14. Declarations of pecuniary and non pecuniary interests.

Councillors Houghton declared a non-pecuniary interest as a non-executive director of Barnsley Hospital NHS Foundation Trust, and Councillor Platts declared a non-pecuniary interest as a partner governor of Barnsley Hospital NHS Foundation Trust.

15. Minutes of the Board Meeting held on 12th August, 2014.

Members considered the minutes of the previous meeting, held on 12th August, 2014.

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

16. Section 256 Agreement

The meeting considered the Section 256 Agreement and the proposed use of the £5.767m allocation transferred from NHS England to Barnsley Council.

RESOLVED: - that the Section 256 Agreement and proposed use of funding be approved.

17. Better Care Fund

The item was introduced by way of a presentation by the Health and Wellbeing Development Manager. The presentation included information on the background to the Better Care Fund (BCF); the relevance to Barnsley; details of the submission including the schemes proposed; and the timeline for further development and implementation.

Members noted the value of the BCF which was £3.8bn nationally, and that this was not additional finance, but created a single formal pool from April, 2015.

Also noted was the intention of the fund to transform and integrate health and social care; reducing emergency admissions to hospital and therefore helping to reduce overall costs.

The meeting heard how the fund now contained a performance pot of \pounds 1bn, \pounds 300m of which was based on 3.5% reduction in emergency admissions.

The timelines for development and submission, and the expected dates for feedback were noted. Partners were commended for their attendance at the working group that developed the submission, and thanks were given regarding the amount of time contributed by partners. It was acknowledged that a variety of support had been available from NHS England.

Members noted that the BCF proposals were part of wider whole system transformation. Also noted was a commitment to a medium term financial strategy for the whole of Barnsley to help ensure the greatest impact from every pound spent in the area. It was acknowledged that this was complementary to Barnsley's Pioneer status.

The meeting noted the two documents to be submitted: - a planning template which contained the narrative and details of the proposed schemes, and a template detailing finance and metrics to measure the benefits to be realised. Members noted that the schemes covered the whole care pathway and were wider than just the BCF itself, but all contributed to reducing emergency admissions.

The meeting noted underlying principles of the work which included maximising independence; targeting support around the individual; and developing more effective prevention, re-ablement and short term interventions to keep people out of the formal system as long as possible.

It was noted that the BCF submission deadline was the 19th September, 2014 and details of the assessment were expect approximately 2 weeks after this date. Members were reminded of the work required before the implementation date of April 2015, which included ensuring appropriate governance and arrangements for performance management were in place.

Various risks across the system and specific to certain agencies were discussed. These included the financial pressure faced by many agencies, and also the recognition that emergency admissions numbers were currently increasing. Members noted that a number of the proposed schemes were embryonic, but that all those being proposed had been developed using an evidence base, and were selected as those predicted to give the highest return on investment.

It was suggested that transformational plans needed to be radical, with all options explored, and that interventions should be discontinued if they are not achieving the required outcomes.

Assurances were given that plans were in place to make the transition from currently funded scheme to those within the proposals.

It was noted that praise had been received around how providers were positively engaged in Barnsley. It was suggested that the Provider Forum could be tasked to consider how they, individually and collectively, could contribute to the achievement of the proposed metrics.

The meeting heard of ongoing work to re-shape the JSNA. It was noted that this would necessarily need to reflect the BCF and schemes within, and would provide a useful measure of the impact on health in the borough.

Members noted current work in primary care aimed at addressing deficiencies. It was hoped would impact positively elsewhere in the health economy.

It was suggested that information sharing and close partnership working were essential to the success of the BCF and wider transformational programmes, going forward. It was noted that a review of governance would ensure arrangements were fit for purpose.

RESOLVED:-

(i) that the Better Care Fund proposals as contained within the circulated documents be approved for submission;

(ii) that the Senior Strategic Development Group takes forward a review of governance to ensure arrangements are fit for purpose in delivering the schemes envisaged in the Better Care Fund proposals and wider transformation of health and social care;

(iii) that the Senior Strategic Development Group develops a robust framework in order to measure the performance of the schemes relating to the Better Care Fund and also the wider health and social care economy in Barnsley.

Chairman

Council Governance Unit Town Hall, Barnsley

September, 2014.