

MINUTES OF A MEETING OF THE HEALTH AND WELLBEING BOARD
HELD AT THE TOWN HALL, PETERBOROUGH ON 21 JANUARY 2013

Members Present: Councillor Marco Cereste – Leader of the Council (Chairman)
 Councillor Wayne Fitzgerald – Cabinet Member for Adult Social Care (Vice Chairman)
 Sue Westcott, Executive Director Children’s Services, PCC
 Terry Rich, Director of Adult Social Care, PCC
 Dr Andy Liggins, Director of Public Health, PCC
 David Whiles, Peterborough LINK – Pathfinder Local HealthWatch
 Andy Vowles, Chief Operating Officer, Cambridgeshire & Peterborough Clinical Commissioning Group

Also in Attendance: Bob Dawson, Independent Consultant, Health and Wellbeing Strategy (item 4)
 Alex Daynes, Senior Governance Officer, PCC
 Helen Edwards, Solicitor to the Council, PCC
 Jawaid Khan, Cohesion Manager, PCC (item 7)
 Cathy Mitchell, Cambridgeshire & Peterborough Clinical Commissioning Group
 Wendi Ogle-Welbourn, Assistant Director, PCC (item 8)
 Paul Phillipson, Executive Director Operations, PCC
 Julie Rivett, Neighbourhood Manager, PCC (item 7)
 Brian Tyler, DIAL (item 7)
 Councillor Irene Walsh (item 7)

| Item | Discussion and Decision | Action |
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| 1. Apologies for Absence | Apologies for absence were received from Councillor Scott, Councillor Holdich, Gillian Beasley, Dr Withers and Dr Caskey | |
| 2. Declarations of Interest | None. | |
| 3. Minutes of the Setup Meeting held on 24 September 2012 | The minutes of the meeting held on 24 September 2012 were approved as a true and accurate record. | |
| 4. Health and Wellbeing Strategy | <p>The Board received a report and the latest Strategy document seeking its endorsement of the revised Health and Wellbeing Strategy and to initiate the establishment of an accountability process to ensure that progress on achieving the objectives and associated outcomes was effectively monitored and reported to the Board, member organisations and wider partnerships.</p> <p>Dr Andy Liggins expressed his thanks to the work undertaken by Bob Dawson in completing this work.</p> <p>The Board considered the documents and AGREED to:</p> <ol style="list-style-type: none"> 1. Approve the revised Health and Wellbeing Strategy in the light of consultation responses; | |

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| | <ol style="list-style-type: none"> 2. Agree that the objectives in the strategy are incorporated in the commissioning plans of the key statutory agencies; 3. Review the impact of the Health and Wellbeing Strategy in September 2013 through an analysis of those commissioning plans and associated outcomes; and 4. Acknowledge the importance of the work of other strategic partnerships that operate under the banner of the Greater Peterborough Partnership in the achievement of the objectives of the strategy and commend those partnerships to own and act on the health and wellbeing priorities as part of their work programmes. | |
| <p>5. Draft Commissioning Intentions</p> | <p>The Board received a report seeking its views on the commissioning intentions of the partners on the Board for 2013/14 and to recommend any further options in line with the Health and Wellbeing Strategy. Each partner updated the Board on its own intentions as below:</p> <p>(b) Local Authority</p> <ul style="list-style-type: none"> • Focus on preventative agenda; • Further resources to be put to dementia care; • Children’s Services commissioning strategy to come to a future meeting; • Public Health grant increased form last year. <p>(a) Clinical / Local Commissioning Group (CCG / LCG)</p> <ul style="list-style-type: none"> • Primary Care Trust closes on 31 March; • The CCG will cover most of the PCT functions, the National board covers others and the Local Authority covers some functions; • Eight LCGs in Cambridgeshire and Peterborough area; • A moderation panel later in the month will determine if the CCG is authorised; • Revision of Cambridgeshire Community Services needed; • Clinically led priorities; • First full plan due 25 January; • Reduction in inappropriate bed use for the over 65s to be tackled as a priority along with two other key priorities; <p>Responses to questions and further comments included:</p> <ul style="list-style-type: none"> • Around 200 of 230 positions filled across the CCG; • Unclear if the three priorities can change once submitted; • Shortlisted indicators to prioritise scored higher than other indicators such as children’s issues; • Some services commissioned by the National Board; • Need to see plan for Peterborough; • Investment and alignment of budgets to be determined once priorities selected; • Need to circulate the Peterborough Plan to members; • Like to see other priorities not just elderly and long term care addressed including mental health, disabilities and other vulnerable groups; • Multi agency approach needed; <p>(c) National Commissioning Board</p> | <p>CM/AV</p> |

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| | <p>A representative from the National Board was unable to attend this meeting.</p> <p>(d) LINK / Healthwatch</p> <ul style="list-style-type: none"> • Peterborough Healthwatch to be in place by April; • Closer working with the Citizens Advice Bureau; • Will work with Children’s Services to ensure ability to review Children’s Social Care. <p>Members AGREED to receive further commissioning updates at the next meeting of the Board.</p> | |
| <p>6. Public Health Outcomes Framework</p> | <p>The Board received and noted a report that gave details of the Public Health Outcomes Framework Data Tool that would be used to inform future strategic planning.</p> <p>Comments and responses to questions included:</p> <ul style="list-style-type: none"> • Several negative indicators about patient experience; • Data is from 2010 so current situation might change. | |
| <p>7. Inspire Peterborough</p> | <p>The Board received a report and presentation giving details of Inspire Peterborough, a new charitable organisation trying to increase participation in sport for disabled people, and seeking the Board’s views on support and commissioning options to provide for a project manager to further develop the establishment of the charity.</p> <p>Comments and responses to questions included:</p> <ul style="list-style-type: none"> • This Board has no budget to allocate and no commissioning powers yet; • Would need to justify any council funding ahead of other requests for support; • Public Health could provide up to £10k for the remainder of this financial year; • This Board could support in principle but not fund the position. <p>The board AGREED to support the organisation where possible.</p> | |
| <p>8. Children and Young People</p> | <p>(a) Health Outcomes and Models of Care - Principles for Commissioning and Delivering Better Health Outcomes And Experiences For Children and Young People</p> <p>The Board received a report requesting it adopt the set of principles developed by the Strategic Network for Child Health and Wellbeing for commissioning and delivering better health outcomes and experiences for children and young people.</p> <p>A comment was made that any commissioning principles must be sustainable for Peterborough. It was confirmed that this could be included when considering commissioning.</p> <p>Following consideration of the report, the Board AGREED to adopt the set of principles developed by the Strategic Network for Child Health and Well Being for commissioning and delivering better health outcomes and</p> | |

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| | experiences for children and young people. | |
| | <p>(b) Health Watch Ambassador for Children and Young People</p> <p>The Board received a report requesting it endorse the employment of a Healthwatch Ambassador for Children and to support the funding arrangement for the post.</p> <p>Following consideration of the report, the Board AGREED to endorse and support:</p> <ol style="list-style-type: none"> 1. The employment of a Peterborough young apprentice to be a trained and supported Health Watch Ambassador for Children at a cost of between £11,181 and £18,181 depending on experience. The apprentice would be managed on a day to day base by Children's Youth Services. Support and training will be provided by a regional project manager; and 2. A funding share of 1/3rd Public Health, 1/3rd Children's Services and 1/3rd Clinical Commissioning Group (CCG). | |
| 9. Schedule of Future Meetings and Draft Agenda Programme | The Board received and considered the agenda plan for future meetings and no further items were added. | |

**4.30 pm
Chairman**

| Relating to: | <u>ACTIONS</u> | By whom | By when |
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| CCG commissioning intentions. | Circulate the Peterborough Commissioning Plan to members. | Cathy Mitchell | After 25 January |