



## **MINUTES OF THE HEALTH AND WELLBEING BOARD**

### **Tuesday 22 March 2016 at 7.00 pm**

PRESENT: Councillor Butt (Chair), Dr Ethie Kong (Vice Chair), Dr Sarah Basham (Assistant Chair, Brent Clinical Commissioning Group), Carolyn Downs (Chief Executive, Brent Council), Councillor Hirani (Lead Member for Adults, Health and Wellbeing, Brent Council), Councillor Moher (Lead Member for Children and Young People, Brent Council), Ian Niven (Director, Healthwatch Brent), Phil Porter (Strategic Director, Community and Wellbeing), Dr Melanie Smith (Director of Public Health, Brent Council) and Gail Tolley (Strategic Director, Children and Young People, Brent Council)

Also Present: Simon Crawford, Executive Director of Strategy, London North West Hospitals Trust

Apologies were received from: Councillors Carr, Pavey, Larkman and Mansuralli

#### **1. Declarations of interests**

None declared.

#### **2. Minutes of the previous meeting**

RESOLVED:-

that the minutes of the previous meeting held on 26 January 2016 be approved as an accurate record of the meeting.

#### **3. Matters arising**

None.

#### **4. Sustainability and Transformation Plan 2016-20**

Board members had before them the submitted report which provided information on the requirements and timelines for producing the Sustainability and Transformation Plan (STP) as set out in the Shared Planning Guidance (December 2015). The report further set out the approach to developing the Sustainability and Transformation Plan in partnership across health and care organisations in North West London and locally in Brent.

The Strategic Director, Community Wellbeing introduced the report with the aid of a presentation. He explained what the purpose behind the plan was and how the requirements for it had been interpreted locally. There was a need to ensure that beyond the plan action was taken where necessary to improve the system. Although the STP had to be submitted by 30 June 2016 there would be ongoing engagement and development of it.

Attention was drawn to the key questions set out in paragraph 3.3 of the report submitted. Reference was made to the importance of factoring in children and young people as well as making explicit reference to the areas of CAMHS and childhood obesity. The point was made that the financial gap in social care that would exist by 2020 needed to be identified and what radical action was needed to close the gap through integrated service transformation. It was recognised that addressing workforce issues needed to be strongly reflected in the plan. This would need separate discussions to understand the issues confronting workforce integration.

RESOLVED:

- (i) that the requirements and timescales for producing the Sustainability and Transformation Plan be noted;
- (ii) that the approach to developing the plan at a local and North West London level in conjunction with health and care partners be endorsed.

## **5. Better Care Fund priorities**

The Board considered the submitted report which explained the importance of The Better Care Fund (BCF) as a vehicle for driving forward health and social care integration at pace and scale. A local single pooled budget would incentivise the NHS and local government to transform services and provide people with the right care, at the right place, sensitive to their specific needs and delivered in partnership to the highest standards.

Helen Woodland was introduced to the meeting as the newly appointed Operational Director for Adult Social Care. With the aid of a presentation she took board members through the report.

Ian Niven (Director, Healthwatch Brent) sought assurance that the engagement of the community was recognised within the workstreams. The potential for the District Nursing service operating joint care packages was raised. The issue creating single points of access was discussed. The value for money aspect of the Winter Plan was questioned and it was acknowledged that this needed to be addressed because it had not made best use of the available resources. It was suggested this matter should be picked up by the Systems Resilience Group.

RESOLVED:

- (i) that the progress Brent has made on health and social care integration be noted;
- (ii) that the recommended 2016/17 priority areas for health and social care integration be endorsed;
- (iii) that the Brent CCG Chief Operating Officer and the Brent Strategic Director of Community Wellbeing be delegated authority to sign off final plans and the s75 agreement;

- (iv) that the proposed programme approach to successful delivery be endorsed;
- (v) that the proposed assurance sign off of Brent's Better Care Fund submission for 2016/17 be agreed.

## **6. Children and Young People's Mental Health and Wellbeing Transformation Plan implementation**

The originally published report had been amended by:

- (i) replacing reference to Better Care Fund submission with CYP-LTP in the third bullet point under paragraph 2.0 Recommendations,
- (ii) showing Dr Sarah Basham and Gail Tolley as named lead officers with Duncan Ambrose and Graham Genoni as contact officers
- (ii) removing the watermark on the report marking it as a draft.

Duncan Ambrose, Assistant Director, NHS Brent CCG introduced the report which outlined Brent's Children and Young People's Mental Health and Wellbeing Local Transformation Plan (CYP-LTP) which would be used to review existing arrangements with the intention of reshaping and improving the use of resources.

**RESOLVED:**

- (i) that the progress to date on delivering the Children and Young People's Mental Health and Wellbeing Local Transformation Plan (CYP-LTP) be noted;
- (ii) that the principle that the additional funding from NHS England should be additional to the existing funding identified in the CYP-LTP be endorsed;
- (iii) that the proposed assurance sign off of the CYP-LTP submission for 2016/17 be agreed.

## **7. Primary Care Transformation**

The Board received the submitted report which provided an update on the local work to deliver the objectives of Primary Care Transformation - a portfolio of work to develop effective and sustainable Primary Care in Brent.

Responding to questions regarding what the future held for GP practices, it was explained that it was not the intention to reduce the number of GPs but that some practices would be supported to provide some specialised services to share with other practices. Lessons would be learnt from different models of provision from around the country as GP practices around the country went through a period of transition. Board members asked questions around GP and patient engagement and it was acknowledged that the priority for patients was to get an appointment with their doctor. Patient engagement was critical in order to get across the changes taking place and the reasons for them. A view was put that there remained a disconnection with the public who did not know what the role of the CCG was and with those that did not have a doctor. A greater level of engagement was needed.

**RESOLVED:**

that the report and comments of Board members be noted and an update be presented to the Board in due course.

**8. 2015/16 revision of the Joint Strategic Needs Assessment (JSNA)**

The Board was presented with an updated Joint Strategic Needs Assessment of health and social care needs. It was explained that this would feed into the STP process discussed under minute 4 above and impact on the outcome based reviews.

The transience of the local population was noted and the importance of understanding the changing demographics so that informed commissioning took place was noted. It was submitted that a dynamic JSNA allowed the issues to be identified and addressed.

RESOLVED:

- (i) that the publication of the JSNA Overview Document attached to the report submitted be agreed;
- (ii) that the plans for the dissemination of the JSNA within the CCG, the Council and HealthWatch members be noted;
- (iii) that for the purposes of future planning the JSNA be incorporated within the STP process.

**9. Any other urgent business**

See below.

**10. Request from Brent Patient Voice for representation on the Health and Wellbeing Board**

The Board considered a report that had been separately circulated which dealt with a request from Brent Patient Voice to be represented on the Health and Wellbeing Board as a co-opted member.

RESOLVED:

that the request from Brent Patient Voice be declined on the basis that the views of residents and patients were represented through the statutory board membership of Healthwatch Brent.

The meeting closed at 8.40 pm

M BUTT  
Chair

