

**Blackburn with Darwen Health and Wellbeing Board
Minutes of a Meeting held on Tuesday, 13th December 2016**

PRESENT:

Councillors	Mohammed Khan (Chair)
	Maureen Bateson
	Mustafa Desai
Clinical Commissioning Group (CCG)	
	Dr Chris Clayton
	Graham Burgess
East Lancashire Hospital Trust (ELHT)	Kevin McGee
Lancashire Care NHS Foundation Trust (LCFT)	
Lay Members	Joe Slater
NHS England	--
Voluntary Sector	Vicky Shepherd
	Angela Allen
Healthwatch	--
Council	Linda Clegg
	Dominic Harrison
	Sally McIvor
	Steve Tingle
Council Officers	Charlotte Bradshaw
	Laura Wharton
	Christine Wood
CCG Officers	Claire Jackson
Other	

1 WELCOME AND APOLOGIES

The Chair welcomed everyone to the meeting and apologies were received from Max Marshall, Penny Morris, Abdul Mulla, Damian Riley and Graham Urwin. The Chair advised the Board that Abdul Mulla (Vice-Chair of

Healthwatch) would replace Sir Bill Taylor on the Health and Wellbeing Board.

2 MINUTES OF THE MEETING HELD ON 27th SEPTEMBER 2016

RESOLVED - That the minutes of the last meeting held on 27th September 2016 be confirmed as a correct record subject to the amendment (item 2) that that minutes of the meeting on 21st June 2016 had been agreed as a correct record and not 27th September 2016 as previously stated.

3 DECLARATIONS OF INTEREST

Joe Slater declared an interest in agenda items 6 and 7 (Annual Safeguarding reports - Chair of Board of Trustees of CANW) and remained in the meeting during submission of each item to the Board.

4 PUBLIC FORUM

No questions had been received.

5 AGE WELL – THEMATIC UPDATE – PRESENTATION

A presentation was delivered to update the Board on the Priorities, Achievements, Plans and challenges in relation to 'Age Well' theme. Priorities were outlined as follows:

1. To develop Blackburn with Darwen as a Dementia Friendly community
2. To increase support to reduce social isolation and loneliness
3. To take action on agreed key determinants of the health of older people
4. To develop the local integrated service offer to promote independence

Progress in relation to each of the priority areas was outlined within the presentation which included detailed case studies and presentations, providing examples, a summary of achievements and positive outcomes in relation to each of the priorities.

The Board was advised of the Each Step Dementia Care Home that had opened in Blackburn in May 2016 (run by Community Integrated Care) and had recently been awarded 'Best Dementia Care Home 2016' at the National Dementia Care Awards. Phil Benson, Manager at Each Step had also been awarded the Best Dementia Care Manager 2016 at the event. Plans for the Albion Mill Extra Care Scheme were also outlined to the Board.

Future challenges were also outlined to the Board as follows:

- Combination of increasing numbers and complex needs was creating a non-linear increase in demand across health and care, areas like BwD suffer disproportionately given health inequalities, housing and poverty.
- Health life expectancy appeared to be decreasing
- Full integration of health and care mandated by 2020
- Prevention spend was under threat within health and social care although part of the solution
- Reducing resources and large scale budget pressure in social care impacting on the wider system

- Demographic pressures increase markedly after 2020 – we would need more of everything
- Dementia pathway needs improving
- Still too many “single points of access” and difficulty in navigating the health and care system

A discussion took place and some of the key points that arose were:

- Possible increase in local Council Tax to fund Social Care (not considered to be the answer for this area)
- Suggestion that increase in income tax would be a fairer process
- Lack of public transport issue leading to loneliness
- Unmet need for BME residential care

RESOLVED – That the presentation be noted.

6 LOCAL SAFEGUARDING ADULTS BOARD (LSAB) ANNUAL REPORT, 2015-2016 AND LOCAL SAFEGUARDING CHILDREN'S BOARD (LSCB) ANNUAL REPORT 2015-2016

A report was submitted presenting the Local Safeguarding Adults Board Annual Report and Local Safeguarding Children's Board Annual Report 2015-2016 to the Board. Business Plans 2016-2017 for each Board were also presented to the Health and Wellbeing Board.

The Annual Reports set out how the various statutory functions of the Safeguarding Boards had been fulfilled in 2015-2016 and how local safeguarding arrangements would be improved and prioritised in 2016-2017.

It was reported that all priorities set out in the business plans aimed to ensure that children, young people and adults at risk of abuse and neglect in the borough were 'safe from harm' and 'felt safe from harm'.

The reports were key evidence to promote local accountability about the safety of local residents. For individual partners, their commitment and involvement in meeting the priorities set out in the business plans would be a key area of judgement in their partnership work.

It was reported that one of the statutory objectives of the Safeguarding Boards was to ensure the effectiveness of what all partners do to safeguard children, young people and adults at risk of abuse and neglect. All partner agencies of the Safeguarding Boards and of the Health and Wellbeing Board would be required to have regard to the priority areas set out in both reports.

It was also reported that Safeguarding Boards were funded through contributions by partner agencies. The reports also set out the budget and spending in 2015-2016; resource implications of the 2016-2017 priority areas would be met from the budget already agreed with Council Finance Officers (agreed for the 2016-2017 period in August 2016).

The Board was advised that all partners of the LSCB AND LSAB, including the voluntary sector had been consulted throughout the process of producing the document.

RESOLVED – That the reports be noted.

7 LGA PEER REVIEW – CHILDREN IN CARE, 2016 VERBAL UPDATE

The Board was advised of the The Local Government Association (LGA) recently completed peer review of Children's Services (5th – 8th December 2016). The peer review had been in the form of a Care Practice Diagnostic (CPD), designed to assist councils in further strengthening their work with and support to children and young people in care and to provide an independent view about the quality of care practice.

It was reported that the review team had noted strengths in Blackburn with Darwen in the commitment to children at all levels and across partners, the can-do culture, visible leadership and good engagement with children and young people.

It was further reported that a number of suggestions of areas had been made to consider for improvement, most of which had focused around the increased demand and the ability to meet that demand with current resources available. There were also some issues to consider, such as more joint commissioning around health, and a reconsideration of the work taken by the Multi-Agency Safeguarding Hub (MASH) to ensure that single agency work was not inadvertently being handed over to the MASH

RESOLVED – That the above be noted.

8 PENNINE LANCASHIRE TRANSFORMATION PROGRAMME/LANCASHIRE AND SOUTH CUMBRIA STP

A report was submitted to update the Board on the development of the Pennine Lancashire Transformation Programme's Local Delivery Plan and the Lancashire and South Cumbria Sustainability and Transformation Plan.

It was reported that Lancashire and South Cumbria, along with all other STP footprints, had submitted outline plans and financial information to NHS England and NHS Improvement in line with national requirements in June, September and October 2016.

Members were advised that the Lancashire and South Cumbria Sustainability and Transformation Plan (October 2016) had been published on 11th November 2016. Areas that had been focussed on were outlined in the report.

The Pennine Lancashire Transformation Programme was currently developing a Business Case, which would be published for consultation in January/February 2017. Proposals for a new model of care in line with the Programme's commitments were outlined in the report.

It was reported that the Programme was utilising the Solution Design Process to develop the new model of care. Solution Design provided a framework for designing, refining and approving the key elements of the new health and care system. This would ensure a wide range of health and care professionals and patient representatives were involved in the design of the new health and care system and included public engagement as an integral part of the process.

It was further reported that alongside the development of the new model of care, the Pennine Lancashire System Leaders' Forum was working through an agreed process to develop proposals for how an Accountable Care System could be designed for Pennine Lancashire. This would include consideration of the proposals for the new models of care and discussions about which services were appropriate for inclusion in the design of an Accountable Care System.

The Board was advised that a programme of consultation and engagement was underway as part of the Pennine Lancashire Transformation Programme. This had included three public engagement events to date and a strong social media presence alongside the regular publication of briefings and newsletters. Further engagement events were planned for early 2017.

An engagement report would be submitted to a future meeting of the Health and Wellbeing Board.

A copy of the Pennine Lancashire Local Delivery Plan on a Page was attached to the report for information.

RESOLVED – That the Health and Wellbeing Board:

1. Note the progress towards developing a Local Delivery Plan for Pennine Lancashire; and
2. Note the progress on development of the Sustainability and Transformation Plan for Lancashire and South Cumbria.

9 LANCASHIRE COMBINED AUTHORITY (LCA)

The Board was advised that the LCA had been in operation in shadow form since July 2016, continued to meet on a monthly basis and had five core policy themes as follows:

- Skilled Lancashire
- Better Homes for Lancashire
- Connected Lancashire
- Prosperous Lancashire
- Public Services Working for Lancashire

It was reported that the shadow LCA was already having a positive impact for Lancashire and was developing a Lancashire Plan which would set out a vision for Lancashire based on the five core themes.

The Board was advised that over recent months Leaders had been developing a proposal for devolution to the Lancashire Combined Authority, which could enable greater control, power and influence over a range of programmes and funding delivered in Lancashire.

Members were advised that in order to establish the Combined Authority, an Order must be laid before Parliament. It was anticipated that this would be agreed shortly and Leaders would be requested to write to the Secretary of State to consent to the Order being laid. It was also anticipated that the Lancashire Combined Authority would be formally established from April 2017,

although there was some frustration from Lancashire Leaders on the slow progress from Government, and this was also being reflected nationally.

RESOLVED – That the update be noted.

10 BETTER CARE FUND QUARTER 2 REPORT

A report was submitted to provide the Board with an overview of Better Care Fund performance reporting for quarter 2 (July-September 2016).

It was reported that the quarter 2 submission had been made on 25th November following sign off by the Chair of the Board. The submission had included an update on performance against national metrics between July and September 2016. Details of the performance against national metrics between July and September 2016 were outlined in the report.

A review of performance in relation to key successes, challenges and actions that had been included in the submission were also outlined in the report.

Members were advised that further submissions would be required on a quarterly basis and would be reported to the Health and Wellbeing Board at subsequent meetings.

The Board was reminded that the 2016/17 budget was £12,433,000. Details of how the budget had been allocated were highlighted as follows:

Spend on Social Care	£5,544,332.00
Spend on Health Care	£4,119,224.00
Spend on Integration	£2,165,536.00
Contingency	£603,908.00

It was also reported that it had been agreed that the contingency budget would be held until later in the financial year to enable a wider understanding of system requirements. This would be monitored by the Executive Joint Commissioning Group during quarters 3 and 4.

The Board was advised that the BCF policy framework and planning guidance for 2017-18 had not yet been released. It was expected that HWB's would be required to sign off plans prior to final submission. Guidance would be shared with Members of the Board once, published, along with required timescales for submission.

RESOLVED – That the report be noted.