Slough Wellbeing Board – Meeting held on Wednesday, 11th May, 2016.

Present:- Lise Llewellyn (Vice-Chair, in the Chair), Councillor Hussain, Ruth Bagley, Ramesh Kukar, Dr Jim O'Donnell, Les O'Gorman, Krutika Pau, Alan Sinclair, Pretesh Singadia (from 5.12pm, deputising for Colin Pill) and Superintendent Wong

Apologies for Absence:- Councillor Anderson and Naveed Ahmed

PART 1

70. Declaration of Interest

No declarations were made.

71. Minutes of the last meeting held on 23rd March 2016

Resolved – That the minutes of the meeting held on 23rd March 2016 be approved as a correct record.

72. Frimley Sustainability and Transformation Plan (STP)

John Lisle, Accountable Officer for Berkshire East Clinical Commissioning Group (CCG), updated the Board on the Sustainability and Transformation Plan (STP) for the Frimley footprint which would be submitted to the Department of Health by the end of June.

The STP would set out the key priorities across the system for the next five years and would be crucial to securing transformation funding. A significant amount of work had already been done with partners which had helped identify five emerging priorities:

- 1. Making a further step change to improve wellbeing, increase prevention and early detection
- 2. Significant action to improve long term condition pathways including greater self management and proactive management across all providers.
- 3. Frailty pathways: providing proactive management of frail complex patients, having multiple complex physical and mental health long term conditions, reducing crises and prolonged hospital stays.
- 4. Redesigning urgent and emergency care, including integrated working and primary care models providing out of hospital responses to reduce hospital stays.

5. Reducing variation and health inequalities across pathways to improve outcomes and maximise value for citizens across the population, supported by evidence.

Generally positive feedback had been received from the Department on the initial submission on governance and headline priorities and further work would be done to address the areas that scored lowest. The timescale for the fully developed plan was tight and it was hoped that effective patient engagement could be undertaken prior to submission.

(Pretesh Singadia joined the meeting)

The Board discussed the overall purpose and scope of the STP, and it was noted that the plan was focused on identifying and addressing the common issues and priorities across the Frimley system. A strong plan would be required to attract the additional transformation funding and it would complement rather than replace local plans, strategies and activities to address local priorities in Slough. A range of other issues were discussed including the prioritisation of specific groups, for example young people, and conditions such as diabetes and TB that were key local priorities. The Board emphasised the importance of ensuring that the STP contributed rather than cut across the improvement of health outcomes and priorities locally.

Resolved – That the update be noted.

73. SWB Future ways of working and priorities

A report was considered on the next steps on the priorities and future ways of working for the Board following the recent consultation on the review of the Slough Wellbeing Board; the wider partnership arrangements and refresh of the Slough Wellbeing Strategy.

There had been a positive response to the consultation undertaken since the workshop held in January and the Board considered a series of appendices that set out the consultation feedback, proposals on ways of working and outline of a new Wellbeing Strategy. It was proposed and agreed to establish a Task and Finish Group comprising Les O'Gorman, Naveed Ahmed and Dean Tyler, with input from Democratic Services, develop and present revised ways of working and terms of reference to the Board.

The structure and operation of the wider partnership was discussed, including the enhanced role of the Health Priority Delivery Group (PDG). It was agreed that PDGs and sub-groups should only exist where they had a clear purpose and the partnership model would vary across the different priority themes. These groups would require the leadership and practical support of a range of partners, not just the Council. The engagement of partners was agreed as bring critical to success, as was streamlining partnership structures and ways of working, including reports to the Board, to reduce duplication and provide greater focus. In addition to the statutory roles of the Board it was agreed to continue with Board's role in considering the wider determinants of health. Any delegations to PDGs and sub-groups should be clear, with decisions coming back to the Board where necessary. Board members also emphasised the importance of strong community engagement and suggested the potential use of partners as a 'think tank' for Slough.

The rationale for approach taken towards the refresh of the Wellbeing Strategy was explained and it was agreed to focus on those priority issues where the partnership could add most value. Emerging priorities identified at the workshop and consultation included life expectancy and health inequality; mental health and housing. It was suggested that the Strategy be explicit about the prioritisation of children and young people and how the text could more strongly reflect these issues. There were a number of options for the appropriate level of consultation for the refreshed strategy and partners made some further suggestions about the mechanisms and key questions for the such consultations. The first Annual Conference for the partnership would be held on 22nd September and would include the launch of the refreshed strategy. It was proposed and agreed that the partnership arrangements, ways of working and revised terms of the reference would be brought to the Board in July for agreement.

Resolved -

- (a) That the findings at Appendix A from the recent consultation be noted and a Task and Finish group be appointed to look at our ways of working so that membership, Terms of Reference and timescales could be agreed;
- (b) That the proposal at Appendix B for how the Wellbeing Board will work and how our wider partnership network should operate in future be endorsed;
- (c) That the proposed outline at Appendix C for a new Wellbeing Strategy and in particular the top three priorities for the year ahead be agreed;
- (d) That the timetable at section 7 of the report for next steps be noted and that the new Wellbeing Strategy be launched at a partnership conference on 22 September 2016.

74. Local Healthwatch for Slough

The Acting Director of Adult Social Care updated the Board on the work being undertaken to re-procure a local Healthwatch service for Slough. The current contract would formally end on 31st March 2017 and the local authority had a statutory duty to commission a local Healthwatch organisation. The approach being taken was outlined and the Board would be updated as the commissioning progressed.

Resolved – The Board noted the report and the approach to being taken in relation to the recommissioning of the service when the current contract ended on 31st March 2017.

75. Better Care Fund (BCF) Plan 2016-17

The Board received an information report setting out the final Better Care Fund (BCF) Plan for 2016-17 which was approved by the Joint Commissioning Board and submitted on 3rd May 2016.

Resolved – That the Better Care Fund plan for 2016-17 be noted.

76. Attendance Report

Resolved – That the Attendance Report 2015-16 be noted.

77. Date of Next Meeting

The date of the next meeting was confirmed as 20th July 2016.

Chair

(Note: The Meeting opened at 5.04 pm and closed at 6.27 pm)