

Minutes of a meeting of the Bradford and Airedale Health and Wellbeing Board held on Wednesday 6 April 2016 at City Hall, Bradford

Commenced 1000

Concluded 1125

Members of the Board -

MEMBER	REPRESENTING
Councillor David Green (Chair)	Leader of Bradford Metropolitan District Council
Councillor Simon Cooke	Bradford Metropolitan District Council
Kersten England	Chief Executive of Bradford Metropolitan District Council
Dr Andy Withers	Bradford District Clinical Commissioning Group
Dr Philip Pue	Airedale, Wharfedale and Craven Clinical Commissioning Group
Dr Akram Khan	Bradford City Clinical Commissioning Group
Anita Parkin	Director of Public Health
Bernard Lanigan	Interim Strategic Director of Adult and Community Services
Michael Jameson	Strategic Director of Children's Services
Javed Khan	HealthWatch Bradford and District
Sam Keighley	Bradford Assembly representing the Voluntary and Community sector
Simon Large	Representative of the main NHS Provider

Apologies: Councillor Berry, Helen Hirst and Brian Hughes

Councillor Green in the Chair

30. DISCLOSURES OF INTEREST

No disclosures of interest in matters under consideration were received.



31. MINUTES

Resolved -

That the minutes of the meeting held on 8 February 2016 be signed as a correct record.

32. INSPECTION OF REPORTS AND BACKGROUND PAPERS

There were no appeals submitted by the public to review decisions to restrict documents.

33. WORKING BETTER TOGETHER - A WHOLE SYSTEM FOR HEALTH AND SOCIAL CARE

Previous Reference: Minute 27 (2015/16)

The Interim Director of Adult and Community Services and the Chief Clinical Officer of the Airedale, Wharfedale and Craven, and Chief Officer Bradford City and Bradford Districts Clinical Commissioning Groups submitted **Document “O”** which provided progress on work across the health and care system to “create a sustainable health and care economy that supported people to be healthy, well and independent” (Bradford District and Craven Five Year Forward View). It also included an update on progress to develop the Learning Disability Transforming Care Plan for the District and details of the Better Care Fund for 2016/17 which continued to be part of the alignment of resources across the health and care system to support integration.

It was reported that Bradford Health and Care Partners continued to work together under the umbrella of the Sustainability and Transformation Plan (STP) – a multi-year plan built around the needs of local population.

Members were informed that the initial submission of the Bradford District and Craven STP was in March 2016 with a formal submission to be provided to NHS England in July 2016. NHS England along with NHS Improvement and Public Health England would assess each STP. Plans of the highest standard would gain access to the transformation funding from April 2017.

It was reported that a final submission of the Better Care Fund would be made to NHS England on 25 April 2016 and subsequently brought to a future Health and Wellbeing Board. Quarterly BCF submissions were required to be submitted to NHS England to provide assurance on delivery against the plan would be aligned with the Board’s meeting dates in 2016/17.

Members commented on a number of issues which included:

- The Bradford and Craven Sustainability and Transformation Plan (STP) should be submitted to the Board in June before it was submitted to NHS England.
- Concerned about the recent guidance from NHS England; before this the West Yorkshire Health and Care Community had been developing an approach that saw six STP’s reflecting each local HWB footprint together with an umbrella STP from those areas. governance arrangements for the STP were not clear.



- Concerns should be expressed to NHS England on the direction of travel for the Sustainability and Transformation Plans.
- The STP lead for West Yorkshire would be meeting the West Yorkshire Chief Executives and an update could be provided to Board members following that meeting.
- The STP process was not easy to understand; needed further clarity on what was needed to ensure the Bradford and Craven Sustainability and Transformation Plan was fit for purpose.

It was reported that the STP Plan for Bradford and Craven would be six STP for each area and an overarching STP covering West Yorkshire.

Members were informed that the STP lead for West Yorkshire had confirmed that local transformation would be key; in accordance with that the Council and partners were continuing to develop the local STP and continue to submit the plan in line with NHS England's planning process.

Resolved -

- (1) **That the Bradford and Craven Sustainability and Transformation Plan be submitted to the Board in June 2016 before its submission to NHS England.**
- (2) **That the Chair of the Board writes to NHS England expressing the Board's concerns relating to the guidance on the requirements of the Sustainability and Transformation Plan.**
- (3) **That any developments on the Sustainability Transformation Plan be circulated to Members of the Board.**

ACTION: *Interim Strategic Director, Adult and Community Services/
Chief Officer Bradford City and Bradford Districts Clinical
Commissioning Groups*

34. UPDATE ON PROGRESS/BUSINESS ARISING BETWEEN BOARD MEETINGS OR AT THE BOARDS SUB GROUPS – BETTER CARE FUND

The Chair's progress report (**Document "P"**) provided updates on business arising between Board meetings or at the Board's sub-groups.

Members were informed that the Chair had received and signed off two items in relation to the Better Care Fund on behalf of the Health and Wellbeing Board.

The first was the 2015-16 Quarter 3 performance report from the Better Care Fund which was submitted to NHS England on 26 February.

The second was the proposed scheme for the 2016-17 Better Care Fund intentions which was submitted to NHS England on 21 March 2016.



Provisional Board meeting dates for 2016-17 would be reviewed to enable the full Board to receive and review the Better Care Fund updates before submission to NHS England.

Resolved -

That the progress made since the last update be noted.

35. MENTAL HEALTH IN BRADFORD AND AIREDALE

Previous Reference: Minute 29 (2014/15)

In February 2015 the Health and Wellbeing Board received a report on Mental Health and Public Mental Wellbeing and resolved:

- (1) That adopting a strategic approach whereby Public Mental Wellbeing is considered as a strategic theme in light of both tangible and indirect benefits be endorsed.
- (2) That ongoing work to develop this across Council workforce, working with Morrisons and other local providers be supported.
- (3) That a further detailed report on Public Mental Wellbeing and the work being undertaken in this area be submitted to a future meeting of the Board.

In accordance with the above the Director of Public Health submitted **Document "Q"** which continued the strategic focus and addressed the request made at that meeting.

It was reported that Bradford was in a positive situation as it was developing an integrated Mental Health Strategy; Bradford had a national reputation for certain work such as the Crisis Care Concordat and the integration of Bradford Health and Social Care.

Members commented on a number of issues which included:

- Had issues between mental health and children's social care been looked at such as parents with mental health and its impact on the children and the risks posed to them.
- Focus should be on mental wellbeing and resilience.
- Needed to develop the role of primary care.
- Early intervention and prevention was extremely important.
- More joint working with different services was needed.
- The link between physical and mental health should be recognised.
- Avoiding people getting into crisis stage was crucial.
- Needed to look at joint commissioning of services.
- Recognising the importance of the role the voluntary sector plays was important.
- Useful for the Board to receive an update in July on the development to an Integrated Mental Health Strategy.
- Needed to look at mental problems associated with drugs and alcohol; how many people were using drugs and alcohol due to mental health? how do you integrate drugs and alcohol services? how do you deal with addicts who had no fixed abode?
- A joint approach to commissioning mental health services was needed; there was a difference in integrated health and commissioning.



- Primary and preventative element needed further work; therapeutic support for children subject to CSE should be looked at.
- A National Task Force report had been completed and contained valuable information which could be considered as the Integrated Mental Health Strategy was being developed.

In response to Members' questions it was reported that:

- Work should be undertaken to create links with Social Care and Child Protection issues and Adults with mental health; different services needed to work together.
- There were good drugs and alcohol services who worked together.
- New guidelines had been produced to train mental health professionals in schools to work with young people on mental wellbeing and resilience.

Resolved -

That the Board receives an update in July 2016 on work to develop an Integrated Mental Health Strategy which takes into account comments raised at the meeting such as reflecting the link between physical and mental health and the need to have a long-term strategy with a strong focus on: building mental wellbeing and resilience, developing the role of primary care; early intervention and prevention; integrated working with other services and the development of a joint approach to commissioning mental health services.

ACTION: Director of Public Health

36. HEALTH AND WELLBEING BOARD FORWARD PLAN 2016-17

It was decided that the draft forward plan be circulated to Members of the Board.

Resolved -

That a draft Health and Wellbeing Board Forward Plan 2016-17 be circulated to Board Members for their comment.

ACTION: Interim Strategic Director Adult and Community Services

Chair

Note: These minutes are subject to approval as a correct record at the next meeting of the Committee.



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THESE MINUTES HAVE BEEN PRODUCED, WHEREVER POSSIBLE, ON RECYCLED PAPER

