

Minutes of a meeting of the Bradford and Airedale Health and Wellbeing Board held on Thursday, 19 September 2019 in Committee Room 1 - City Hall, Bradford

Commenced 4.05 pm
Concluded 6.00 pm

Present

Members of the Board -

MEMBER	REPRESENTING
Councillor Susan Hinchcliffe	Leader of Bradford Metropolitan District Council (Chair)
Councillor Sarah Ferriby	Healthy People and Places Portfolio
Councillor Robert Hargreaves	Bradford Metropolitan District Council
Bev Maybury	Strategic Director Health and Wellbeing
Steve Hartley	Strategic Director, Place
Brendan Brown	Chief Executive of Airedale NHS Foundation Trust
Geraldine Howley	Group Chief Executive, InCommunities Group Ltd
Dr Sohail Abbas	Bradford City Clinical Commissioning Group (Deputy Chair)
Brent Kilmurray	Chief Executive of Bradford District Care NHS Foundation Trust
Dr Andy Withers	Bradford District Clinical Commissioning Group
Dr James Thomas	Airedale, Wharfedale & Craven Clinical Commissioning Group
Sarah Muckle	Director of Public Health
Bev Maybury	Strategic Director Health & Wellbeing
Ben Bush	District Commander, West Yorkshire Fire & Rescue Service
Osman Khan	Chief Superintendent Bradford District, West Yorkshire Police

Also in attendance: Jenny Cryer for Mark Douglas, Nancy O'Neil for Helen Hirst, Helen Speight for Kim Shutler, Karen Dawber for John Holden

Apologies: Kersten England, Louise Auger and Dr Richard Haddad

Councillor Hinchcliffe in the Chair

7. DISCLOSURES OF INTEREST

No disclosures of interest in matters under consideration were received.

8. MINUTES

Resolved –

That the minutes of the meeting held on 24 July 2019 be signed as a correct record.

9. INSPECTION OF REPORTS AND BACKGROUND PAPERS

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

10. PROGRESS UPDATE ON THE WORK OF THE CHILDREN'S TRUST IN 2018/19 AND THE PROPOSALS FOR THE CHILDREN'S TRUST FROM 2019/20

Board Members were reminded that in 2011 when Children's Trusts had ceased to be statutory, Bradford had taken the decision that the continuation of a strategic partnership leadership group for children remained a priority and the Children's Trust had continued to meet.

The Strategic Director, Children's Services submitted **Document "D"** which set out the work that the Trust had undertaken in 2018/19 and set out proposals to refresh the Board and clarify its role moving forward from 2020.

The Board discussed the proposed change of name from Children's Trust to Children's System Board, noting that a key reason for the change was to recognise the difference between the previous and current arrangements. Another significant reason was the acknowledgement of systems working. The Board was advised that the portfolio holder for Children and Families was now content with the proposed name.

The Group Chief Executive of Incommunities Group Ltd was in attendance and offered to provide a housing representative for the new Board.

The need for strong links with health and care partnerships was stressed and the Assistant Director, Performance Commissioning and Partnership undertook to reflect on how those links could best be strengthened.

Resolved-

- (1) That the Board formally accepts the reporting line from the Children's System Board to the Health and Wellbeing Board.
- (2) That the Health and Wellbeing Board formally agrees to change the name of the Children's Trust to the Children's System Board and that Terms of Reference and paperwork be changed to reflect this.
- (3) That the decision making of the Children's System Board be operated within the principles of subsidiarity, and that a clear scheme of delegation be agreed between the Health and Wellbeing Board and the Children's System Board.
- (4) That the refreshed governance of the Children's System Board be accepted by the Health and Wellbeing Board and put into operation from October 2019.
- (5) That joint resourcing for supporting the Children's System Board be considered.
- (6) That the revised Terms of Reference and work plan of the Children's System Board be submitted to the Health and Wellbeing Board prior to January 2020 for ratification.
- (7) That the Health and Wellbeing Board notes the work undertaken by the Children's System Board.

ACTION: Strategic Director Childrens' Services

11. AUTISM ASSESSMENTS FOR CHILDREN AND YOUNG PEOPLE

The Director of Strategic Partnerships of Bradford District and Craven's Clinical Commissioning Groups submitted **Document "E"** which provided an update around the process and progress of work being undertaken to address the length of wait for autism assessment and diagnosis for Children and Young People.

The Board began consideration of the report with a frank discussion about the length of time that children and young people with autism were waiting to access appropriate services for their needs. Councillor representatives on the Board reported their experiences of case work which had led them to understand that waiting times were both lengthy and increasing. They were advised that this was a national issue and that, locally, additional non-recurrent funding had been allocated to address the issue and that a new working model had been tested and approved but not yet begun. It was considered that the additional funding would provide the opportunity to move to the new model. When fully implemented the new model would enable the autism diagnostic assessment to be completed within three months from the point of referral.

Concern was also raised about the shortage of appropriately qualified professional staff needed to support this group of children and young people.

The Board was informed that the report provided a snapshot of a particular point in time and did not explain the significant work that was now underway to improve the length of time to would take in the future for a diagnostic assessment to take place. The CCG was working with both Wakefield and Tees Esk and Wear Valleys NHS FT to identify different models.

The Chair expressed concern about the length of time that a child must wait for support after their initial assessment. She queried why the new working model had not yet begun and was informed that reasons included funding issues, recruitment of staff, conflicting priorities and enabling young people who had already commenced under the old pathway to complete their assessment, before fully moving to the new pathway for new referrals. It was noted that where possible elements of the new pathway had been adopted within the current process. The issue of Bradford having the youngest population in the country was also highlighted as a factor affecting the number of children and young people waiting for services.

The Board acknowledged that commissioning processes must be followed to enable funding to be released to providers to implement the new model. However the Board urged all those involved to examine whether things could be done differently to reduce the time required for the switch.

Councillor representatives reiterated their concerns based on their caseloads and queried what support a child received whilst on the waiting list. They were informed that each child should be allocated a key worker who would stay with them throughout the assessment process.

It was agreed that feedback to understand people's experiences would be extremely useful.

Resolved-

That the update around the process and progress of work being undertaken to address the length of wait for autism assessment and diagnosis for Children and Young People be noted and the following points in particular be followed up and reported on at a future meeting:-

- **The production of a timeline for transitioning to the new model of provision.**
- **An explanation of the support that is provided while a young person is on the waiting list.**
- **An explanation of the engagement undertaken with young people and families to support the proposed changes to Autism Services.**
- **The statistical information on the monthly fluctuations in assessments completed to be provided to all Board Members.**

ACTION: Director of Strategic Partnerships of Bradford and Craven Clinical Commissioning Groups

12. ASSESSMENT AND DIAGNOSIS OF AUTISM IN ADULTS

The Director of Strategic Partnerships submitted **Document “F”** which summarised the background and current position in relation to the assessment and diagnosis of neurodevelopmental disorders in adults.

The Board was advised that the pressure on services was such that the waiting list had been closed. The Leeds Clinical Commissioning Group had been commissioned to help understand the system and process in Bradford better. Issues in respect of recruitment were the same as had been reported for children and young people, however the waiting list was now virtually clear. Before it was reopened it was essential to ensure that the service was resilient.

The Chief Executive of the Bradford District Care Trust undertook to present information to the Board in respect of workforce issues for both children & young people and adults with autism.

In response to a question about how adults were supported while they were on the waiting list, the Board was advised that £500,000 to £600,000 additional funding had been made available.

The Board was also advised that, while the waiting list was closed, there was still a route to referral for urgent cases via the individual funding request process (IFR). The Panel which considered them met monthly and it was hoped that the waiting list could reopen in the next couple of months. It was stressed that IFR was not suitable for mass referrals but was used for exceptional cases where people’s needs had to be picked up urgently.

The Chair queried whether the strain on services for adults was specific to Bradford and was informed that issues around recruitment had led to the waiting list building up. Although Leeds had a different arrangement there would be economies of scale from working together and a short term arrangement was considered best practice until progress was more certain.

Resolved-

That the update be noted and a future report include details on the issues of :-

- **The recruitment and training of specialist staff.**
- **Ensuring that there is local access to Autism Assessment Services for the residents of Bradford.**

ACTION: The Director of Strategic Partnerships

13. CHILD AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS)

A comprehensive powerpoint presentation was submitted to the Board on the Child and Adolescent Mental Health Service (CAMHS) by the Chief Executive of the Bradford District Care NHS Foundation Trust.

The Board was reminded that the Specialist Child and Adolescent Mental Health Service (CAMHS) was the specialised clinical service to support children and

young people across the Bradford and Airedale district from the age of pre-school up to 18 years of age, (25 if a child leaving care or with a learning disability) where there were significant concerns about a child's mental health or emotional well-being. The service sat within a pathway of broader mental health and wellbeing services for young people.

The Board discussed the presentation in detail and agreed that a full pathway review as described in the presentation was essential as responsibility for Child and Adolescent Mental Health sat with all the Board's partners, not just within the health arena.

Board Members also commented that:-

- Given the number of children in the system currently requiring specialist services , it was optimistic to think that numbers would reduce.
- Families needed support as a holistic matter, no matter which agency it came from.
- It was important to acknowledge the work of the voluntary sector and charities.
- Feedback and engagement with children and families would be important to the review.

Resolved –

- (1) That a progress report of the review commissioned of Children and Adolescent Mental Health Services be provided in January 2020, to include information about the level of support provided to young people.**
- (2) That the whole system approach to children's mental health and wellbeing as described be endorsed by the Board.**
- (3) That the establishment of a Young Persons Mental Health Board be endorsed and that the requirement to ensure the voice of the child is heard also be endorsed.**

ACTION: Chief Executive of the Bradford District Care NHS Foundation Trust.

14. CHAIR'S HIGHLIGHT REPORT

The Chairs Highlight Report (**Document "G"**) summarised business conducted between board meetings. This report included updates from the Executive Commissioning Board and the Integration and Change Board.

Resolved-

- (1) That Board members acknowledge the breadth of work taking place across the many themes and disciplines that are contributing to supporting the wellbeing of the people of the district and approve the Annual Progress report for the District Plan.**

- (2) That in relation to the Bradford District Plan – Where the Health and Wellbeing Board feel that particular areas of work highlighted in the progress report need greater focus or more cross partnership coordination, that officers and relevant Partnerships be tasked to take action as appropriate.
- (3) That the Executive Commissioning Board and Integrated Change Board updates be noted.

ACTION: Health and Wellbeing Partnership Manager

Chair

Note: These minutes are subject to approval as a correct record at the next meeting of the Bradford and Airedale Health and Wellbeing Board.

THIS AGENDA AND ACCOMPANYING DOCUMENTS HAVE BEEN PRODUCED, WHEREVER POSSIBLE, ON RECYCLED PAPER