25. **Minutes**

**RESOLVED:**

THAT the Minutes of the meeting held on 29 November 2016 be confirmed.
26. **Declarations of Interest**

There were no declarations received at this stage.

27. **IOW Safeguarding Adults Board annual report**

The Safeguarding Adults Board manager explained the annual report was for 2015/16. The introduction of the Care Act had made people more aware of safeguarding issues and the team had seen an increase in the number of reported incidents. The Board was advised that neglect covered a number of issues from mis-medication through to pressure sores.

A change in the law had also seen an increased number of Deprivation of Liberty Safeguards (DoLS) applications being made from care home residents and hospital patients.

The IW Safeguarding Adults Board and Violence Against Women and Girls had joined together to show a presence at the Isle of Wight Festival and Bestival in 2015 which had proved to be successful.

It was noted that some of the referrals to the Adults Safeguarding Board were inappropriate and the level of issues reported needed to be reviewed to streamline the system. Work was underway at a local level to make safeguarding personal.

The meeting was advised that the annual safeguarding conference would be held soon and that everyone was invited to attend.

**RESOLVED:**

(I) THAT the annual Safeguarding report be noted.

(II) THAT detail regarding the Safeguarding Conference be circulated to all members of the Board.

28. **Sustainability Transformation Plan**

The Sustainability Transformation Plan (STP) was driven by a dedicated team resourced and funded by NHS England. A recruitment process for an independent chairman had commenced and interviews would be held at the end of April 2017. A dedicated project manager would be appointed to move the STP forward and a programme management officer had already been appointed.

The STP had been broken down across five areas into local delivery systems. The Isle of Wight was now a Local Delivery System within the setting of the STP. The delivery of the STP aspirations would need to be progressed by working together. A potential resource has been offered to assist in drafting the Local Delivery Plan.

It was noted that the Isle of Wight Council’s Executive had not supported the STP at its meeting in December 2016. Although there had been an agreement
to continue to engage with the process as the STP would proceed with or without the Council’s endorsement.

The Board were reassured that the wellbeing of Islanders was at the heart of the local delivery system plan and their needs would be put first.

RESOLVED:

(I) THAT the draft Local Delivery Plan be brought to the Board.

(II) THAT the STP remain on the agenda as a standard item.

29. **The Primary Care Strategy**

The Board was told that a draft primary care strategy had been drawn up based around seven key challenges that had been identified. A consultation had been undertaken and responses had been received from a number of service users.

A desire from both GP’s and patients to improve access to services with, a seven day service would need to be commissioned. A suggestion for a bursary scheme to be put in place to attract medical staff to the Island would be investigated.

There might be an impact on some smaller more rural surgeries as delivery might not be sustainable. Contracting services would need to be looked at differently for some cases to take account of differing demographics.

The comments received would be fed into the final document. The next step would be to look at, and develop, new programmes around implementation of the Strategy.

RESOLVED:

THAT the Primary Care Strategy be noted.

30. **Tackling harmful levels of drinking**

Leonie Grellier and Chris Cussen of The IW NHS Trust gave a presentation regarding the number of hospital admissions relating to alcohol related disease. Three separate cases were explained to the Board which highlighted that if there was early intervention this would assist patients survival rates.

It was noted that this was an important topic and additional funding and research was required particularly with regard to prevention. The Board was advised that level of people with drinking problems were the same as those with diabetes on the Island and it was believed that a systems approach was needed.

The key issue would be how to secure and provide sustainable funding for the project. There were links between some domestic abuse cases and levels of
alcohol. It was explained that alcohol was seen as acceptable as smoking had been in the 1960’s.

RESOLVED:

THAT the presentation be noted.

31. **My Life a Full Life report**

The My Life a Full Life Programme Director informed the Board that they had worked closely with Health Watch Isle of Wight to undertake a public consultation which would be available in the autumn.

The programme would assist in shaping the Sustainability Transformation Plan (STP) and new models of care for the Isle of Wight. This would allow for outcomes to be highlighted.

RESOLVED:

THAT the update on progress be noted.

32. **Care Quality Commission Inspection**

The Board was advised that the draft CQC report had been submitted to the IW NHS Trust and they were currently checking the report for factual accuracy. The report would then be sent back to the Commission for evaluation and publication.

An Improvement Director has been appointed to assist and support the IWNHS Trust Board.

RESOLVED:

THAT the update be noted.

33. **Better Care Fund Quarterly report Q2 and Q3 2016/17**

The Director of Adult Social Care explained that the Chairman of the Health and Wellbeing Board had the responsibility of signing off the Better Care Fund.

Because of the failure to secure a S75 agreement for the 2016/17 BCF, two Better Care Fund Advisors had been appointed to support the process and ensure that the Better Care arrangements in place. This would enable the Section 75 to be signed off in 2017/18.

Andrew Cozens was asked to review elements of the Better Care Fund which included:

- The previous year’s plan
- Technical issues
• **Pooled budgets**

The previous year’s plan had included more about the input rather than the expected outcomes. There was also a complicated governance arrangement in place around integrated working.

It was noted that there would be a tight turnaround of six weeks between the issue of guidance and the submission date.

There was wider discussions pertaining to the CCG and Local Authority’s decision to jointly commission the Local Government Association to support them in reviewing delayed transfer of care arrangements. Although in quarter two the report showed that the delayed transfer of care was on track and quarter three showed there was no improvement this was due to incorrect data being included.

It was also noted that as a result of the Government’s decision to allocate an additional £2B to meet the extreme funding pressures affecting adult social care, the IoW had been allocated an additional £6.5 million. This would be distributed over the next three years and must go through the Improved Better Care Fund arrangements. There were clear grant criteria attached to the use of these funds and they must: help reduce the levels of delayed transfers of care; support providers; and create more capacity in the community. The Director of Adult Social Care stressed that these additional funds must also support the urgent need to transform the delivery of adult social care on the Island – and that that they cannot increase the department’s revenue budget requirements because they were one off funds. The Director of Adult Social Care was developing proposals for how the funds could best be deployed with the CCG and colleagues from the voluntary and community and independent sectors.

RESOLVED:

(I) THAT a report on Delayed Transfers of Care be included on the next agenda

(II) THAT once agreement had been obtained regarding the Better Care Fund plan this be made available to the Board

(III) THAT the LGA be invited back in 6 months to follow up the review of Delayed Transfers of Care.

34. **Future of the Health and Wellbeing Board**

Members were advised that the Health and Wellbeing Board should be a high priority politically and it was believed that the Leader of the Council should be the Chairman in order to strengthen the delivery of its priorities. The Board underpinned the vision for fully integrated services across the Island.

Clarification was sought regarding the position of Vice chairman. It was understood that the Board would be more comfortable if this position was filled by a board member from outside of the Local Authority.
RESOLVED:

(I) THAT the position of vice chairman be filled by a non local authority representative.

(II) THAT a recommendation be made to the new council that from June 2017, the Health and Wellbeing Board is chaired by the Leader of the Council.

35. **Joint Commissioning Board Notes**

Concern was raised that Sub Committees of the Health and Wellbeing Board had not reported to the Board and would this be chased up. It was noted that the relevance of the Sub Committees also needed to be reviewed.

RESOLVED:

THAT the notes of the Joint Commissioning Board held on 7 December 2016, 4 January 2017, 1 February 2017 and 1 March 2017 be noted.

CHAIRMAN