

SHADOW STATUTORY HEALTH AND WELL BEING BOARD

10TH OCTOBER 2012 at 5.30pm

Present: Councillor Hazel Simmons (Leader of the Council)
Councillor Waheed Akbar (Portfolio Holder – Children’s Services)
Councillor Mohammed Ashraf, (Portfolio Holder – Public Health)
Councillor Mahmood Hussain (Portfolio Holder - Adult Social Care)
Dr Barhey (Chair of Luton Clinical Commissioning Group)
Pam Garraway (Director of Housing & Community Living)
Martin Pratt (Director of Children and Learning)
Gerry Taylor (Director of Public Health)

Observer: Councillor Aslam Khan, Chair - Scrutiny: Health & Social Care Review Group (HSCRG)

In Attendance:

Andrew Burgess – Interim Accountable Officer, LCCG
Bren McGowan – Partnership Manager (LBC)
Michael McMahon – Head of Community Living
Bert Siong – Democracy and Scrutiny Officer (Clerk) (LBC)
Morag Stewart – Deputy Director of Public Health

30. APOLOGIES FOR ABSENCE (REF: 1)

Apologies for absence from the meeting were received on behalf of Linda Hennigan, Community Safety Executive, Chris Ford, NHS Bedfordshire and Luton, Jane Halpin, NHS Commissioning Board and Neville White, MBE, Luton LINK

31. NOTES FROM PREVIOUS MEETING – 5TH SEPTEMBER 2012 (ITEM: 2)

Resolved: The notes of the meeting of the Shadow Health and Wellbeing Board held on 5th September 2012 be agreed.

32. HEALTH AND WELLBEING STRATEGY – DELIVERY BOARDS (ITEM: 4)

Children and Young People’s Trust Board

Martin Pratt gave a presentation, updating the Board on progress achieved by the Children and Young People’s Trust Board (CTB). He highlighted a number of key points about the CTB as follows:

- It was well established, with wide representation from partner agencies;
- It was able to provide some quick wins for the Health and Well-Being Board to which it will report;
- It has a significant impact on the health and well-being agenda but also covers the education & skills and criminal justice agendas;

- Its functions included overseeing implementation of the Children and Young People Plan, promoting integration including through the development of a whole family approach, providing a link between Children and Adults services;

He emphasised practical actions were taken between partners, outside and between meetings, and not 'around the table'. He added priority outcomes were achieved due to the commitments of all partners.

Health Inequalities Board

Gerry Taylor gave a presentation, updating the Board on progress achieved by Health Inequalities Board (HIB). She said HIB was at the stage of identifying members who should be on it and developing sub-group structures, some being already in existence, e.g. tobacco free, healthy weight strategy and wider determinants.

She said HIB needed to develop its work programme to get it started to achieve its objectives and outcomes. She added HIB also needed to look at which key performance indicators (KPIs) to focus on, moving on from the outcome of the Inequality Strategy implemented some years ago. The top line outcome to achieve was to close the gap in life expectancies, which was ambitious.

In response to a question from the Chair, she advised work on the wider determinants would not necessarily look at welfare issues.

Healthier and More Independent Board

Pam Garraway gave a presentation, updating the Board on progress achieved by the Healthier and More Independent Board.

Having established the composition of its membership, she said nominations from the different organisations were needed, to enable the first meeting planned for November 2012 to develop its Terms of Reference, review existing priorities and agree its strategic objectives and KPIs.

She added there was also a need to look at sub-group structures; the Joint Commissioning Group would review the priorities against what were current in place, but a decision was needed how the Prevention group would work or it needed to be a separate group or part of an existing group.

The meeting was then terminated due to a fire alarm.

Resolved: That the oral reports (Ref: 4) on progress achieved by the Delivery Boards be noted.

33. GOVERNANCE (ITEM: 5)

As meeting terminated early due fire alarm, consideration of this report was postponed to a future meeting.

Resolved: That consideration of the report (Ref: 5) be postponed to a future meeting of the Board.

34. HEALTHIER TOGETHER – ACUTE SERVICES REVIEW (ITEM: 6)

As meeting terminated early due fire alarm, consideration of this report was postponed to a future meeting.

Resolved: That consideration of the report (Ref: 6) be postponed to a future meeting of the Board.

35. CLINICAL COMMISSIONING GROUP STRATEGY (ITEM: 7)

As meeting terminated early due fire alarm, consideration of this report was postponed to a future meeting.

Resolved: That consideration of the report (Ref: 7) be postponed to a future meeting of the Board.

36. HEALTHWATCH – PROGRESS REPORT: (ITEM: 8)

As meeting terminated early due fire alarm, consideration of this report was postponed to a future meeting.

Resolved: That consideration of the report (Ref: 8) be postponed to a future meeting of the Board.

(Note: Meeting ended before conclusion of business at 6.45 pm, due to the fire alarm)