

Note of last Community Wellbeing Board meeting

Title:	Community Wellbeing Board
Date:	Wednesday 10 June 2015
Venue:	Smith Square 3&4, Ground Floor, Local Government House, Smith Square, London, SW1P 3HZ

Attendance

An attendance list is attached as [Appendix A](#) to this note

Item	Decisions and actions	Action
1	Welcome and declarations of interest <p>The Chair welcomed Andrea Sutcliffe (Chief Inspector for Adult Social Care at the Care Quality Commission) and Jackie Ballard (Chief Executive, Alcohol Concern) to the meeting as they were providing presentations to the Board meeting. She also welcomed Cllr Sue Woolley (Chair of the Lincolnshire Health and Wellbeing Board) and Jo Farrah (SOLACE) who were both attending in an observing capacity.</p> <p>Apologies for absence were received from Cllrs Louise Goldsmith (substituted by Councillor Clare-Louise Leyland), Andrew Gravells (substituted by Cllr Bill Bentley), Colin Noble (substituted by Cllr Collette Wyatt-Lowe) and Lib Peck.</p> <p>The Chair thanked Katie Hall for her work on the Board as previous Chair and Deputy Chair and wished her well for the future. She welcomed Cllr Doreen Huddart in her new role as Deputy Chair for the Liberal Democrat Group.</p> <p>The Chair also extended her thanks to Cllr Gillian Ford as Deputy Chair for the Independent Group. This was Gillian's last meeting in her three-year term and the Chair thanked her for her significant contribution to the Board and wished her well for the future. The Chair looked forward to seeing Gillian at the Ageing Well event on 24 June.</p>	
2	Care Quality Commission <p>The Board received a presentation from Andrea Sutcliffe, Chief Inspector of Adult Social Care at the Care Quality Commission (CQC). Members were keen to know how best they could work with the CQC to support information flows locally about provider resilience and capacity, particularly in light of local authorities' new role for market shaping under the Care Act 2014. They also were keen for Andrea to outline how the LGA and local leaders could be more involved both in thematic reviews of care pathways, particularly given the focus on local commissioning arrangements.</p>	

Andrea provided her views on how the current inspection and regulation framework for health and social care can promote integration and personalisation. She advised that the CQC make sure health and social care services provide people with safe, effective, compassionate, high-quality care and encourage care services to improve. They also monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety and we publish what we find, including performance ratings to help people choose care.

The five key questions that the CQC asked when inspecting services are:

- Is it effective?
- Is it well-led?
- Is it responsive to people's needs?
- Is it safe?
- Is it caring?

At the present time, over one-third of adult social care services required improvement where poor care and leadership had been identified. Andrea highlighted the "web of care" in terms of person-centred integration care and it related to how does the CQC address the need for integration when there may be poor communication between professionals in various organisations.

Members asked a number of questions and Andrea Sutcliffe responded as follows:

- The CQC were keen to encourage innovation and a dialogue was needed with local communities when new models of care were being rolled out and developed.
- CQC needed to be work flexibly and lobby government over such important issues as elderly care.
- Despite improvements, there was still too much poor care being delivered and there were ways where greater initiatives could be undertaken with the local community e.g. national care homes open days.
- The CQC had currently 723 inspectors, covering 25,000 locations. There had been a difficulty in recruiting Inspectors and the CWC were not at full capacity at the present time. More routine inspections would need to wait whilst more important inspections were conducted.
- The baseline for inspections would be September 2016.
- There was a case for closer working within the health and adult social care sector and the training of staff needed to be developed to a greater degree.
- With better intelligence and commissioning, it was possible for the Care Quality Commission to target more cases of poor practice as part of its inspection regime.

3 Reducing and Preventing Alcohol Harm

The Board received a presentation from Jackie Ballard, Chief Executive Alcohol Concern which is a small independent charity working in England and Wales to change the drinking culture. Its vision is of a world where

alcohol does no harm.

Its mission is to help individuals through information, advice and guidance; help professionals through training, projects and research and campaigning to challenge the drinking culture in our country.

Members were keen to seek Jackie's views on various issues, including whether education was the best way to tackle alcohol misuse, minimum unit pricing and the profound question of personal liberty involved, i.e a balance between a "nanny" state and personal freedom of adults to choose their own lifestyle.

Jackie highlighted the work of Alcohol Concern, statistics and medical evidence concerning alcohol. She considered that local authorities could take the lead at a local level and referred to the "dry January initiative" and work undertaken jointly with the London Borough of Hackney.

Members had a number of questions and Jackie responded as follows:

- Communities needed to work together to address the drinking culture.
- There had been an inter-generational event in South Wales which was a useful initiative at bringing communities together and from different generations.
- It was difficult to state what particular initiatives local authorities should be undertaking in alcohol prevention and education matters as it was considered best to decide this according to local need and local issues.
- Education and self-help initiatives were available for those seeking help with alcohol addiction.
- Alcohol Concern strongly supported Minimum Unit Pricing. As a result of Minimum Unit Pricing taking effect in Scotland, violence had reduced.
- It was difficult to determine clear guidance on units and alcohol drink limits as strengths varied for beer and wine.

4 New Government's approach to health and social care

Sally Burlington (Head of Policy- People) provided an oral update to the Board of the Conservative Party's manifesto commitments in relation to Health and Social Care and two documents had been tabled for the Board's information.

The Board **noted** that the new Government's special emergency budget on 8 July 2015 would mean even tighter budgets across all Government departments, particularly relating to Local Government and would set the spending 'envelope' for the rest of the Parliament until 2020. The Chancellor of the Exchequer had recently announced further saving programmes across all of Government and that as part of this, the Department of Health has been asked to deliver in-year savings of £200m from the public health grant given to local authorities (equivalent to a 7% reduction).

This is on top of the pressures that local government is already facing, not least as the public health responsibilities of local government are so intertwined with the NHS.

Members considered that more funding was needed in transforming services in particular relating to the 0-5 Transfer in October 2015 and Better Care Fund integration. Adult Social Care spending also needed to be protected.

Decision

Members **noted** the oral update. They agreed that there should be maximum flexibility and discretion in where savings could be made in order to accommodate local needs across Local Government and considered that Health and Wellbeing Boards needed to work more closely with colleagues in the NHS. In particular a transitional fund was needed with Adult Social Care and the Better Care Fund.

5 Annual Review of 2014-15 Priorities

This report set out the Annual Review of activities of the Community Wellbeing Board for 2014-15. It concluded by setting out proposals for the priorities for 2015-16 and it was considered there would be a need some flexibility in the work programme to respond to new initiatives and opportunities, and to allow for steers from the Leadership Board and Executive, who may take a more active role in setting the policy priorities across the LGA.

Members welcomed the report of the Board's activities during 2014/15 and **noted** that a lot of positive work had been undertaken during the year.

Members also suggested that consideration should be given to adding the following items to the Board's priorities in 2015/16, subject to final agreement at the Board meeting and awayday on 2 October 2015:

- Cross-board working on housing and social care – including dementia and housing- which was included at item 16.3.5 but this could feature more prominently;
- Migrants health and wellbeing - It was noted that in Lincolnshire, migrants actually underused health and social care services (mainly because of their age and employment profile) contrary to media attention that they were placing a strain on health services
- The Low Commission on Access to legal and welfare advice
- Alcohol misuse – links with obesity, anti-social behaviour, pressure on A&E services and support back to employment – this could be around demonstrating added value of public health and 'health in every policy'. It was also requested for good practice case studies on mobile alcohol unites to take pressure off A&E and possibility of charging people for alcohol-related A&E attendances.
- Sustainability of care home provision and local authority duties on market shaping – in particular, how do we address issues of cross-subsidy of LA funded places in care homes by self-funders?

- Ordinary residence issues – in relation to access to housing and also for looked after children’s access to health check who are placed out of area.
- Winter pressures

Decision

The Board **noted** the annual review of Board priorities 2014/15 and provided a number of suggestions for proposed priorities for 2015/16. There would be further discussion and comments made during the Summer period prior to the Board meeting and Awayday on 2 October and it would also be discussed at the Lead Members’ meeting on 15 July.

a) Appendix A Awayday

The Board noted the draft agenda for the Board and Awayday on 2 October 2015 and suggested names of those to be invited to the meeting.

Decision:

The Board **agreed** the draft agenda and requested that invitations should be extended to: Alastair Burt, MP (Minister of State for Care and Support). If he is unable to attend, Simon Stephens (Chief Executive, NHS England) or Sarah Woollaston MP or Jane Ellison MP would be invited

6 Decisions and actions from the previous meeting

The minutes of the meeting held on 11 March 2015 were **agreed**, subject to the following amendment:

Councillors Linda Thomas, Liz Mallinson and Collette Wyatt-Lowe should be recorded as being present at the meeting.

7 Update on Other Board Business

Members **noted** the report, which covered a wide range of issues.

Appendix A -Attendance

Position/Role	Councillor	Authority
Chairman	Cllr Izzi Seccombe	Warwickshire County Council
Vice-Chairman	Cllr Linda Thomas	Bolton Council
Deputy-chairman	Cllr Doreen Huddart	Newcastle upon Tyne City Council
	Cllr Gillian Ford	Havering London Borough Council
Members	Cllr Barbara Cannon	Allerdale Borough Council
	Cllr Fay Howard	Swindon Borough Council

Cllr Iain Malcolm

Cllr Sandra Samuels
Cllr Elaine Atkinson OBE
Cllr Vic Pritchard
Cllr Kenneth Taylor OBE
Cllr Mark Ereira
Cllr Bill Bentley
Cllr Liz Mallinson
Cllr Claire-Louise Leyland
Cllr Colette Wyatt-Lowe

South Tyneside Metropolitan Borough
Council
Wolverhampton City Council
Borough of Poole
Bath & North East Somerset Council
Coventry City Council
Suffolk County Council
East Sussex County Council
Cumbria County Council
London Borough of Camden
Hertfordshire County Council

Apologies

Cllr Lib Peck
Cllr Lynn Travis
Cllr Colin Noble
Cllr Andrew Gravells
Cllr Louise Goldsmith

Lambeth London Borough Council
Tameside Metropolitan Borough Council
Suffolk County Council
Gloucestershire County Council
West Sussex County Council