

Joint Public Health Board

Minutes of a meeting held at the Civic Centre,
Poole on 7 November 2013.

Present:-

Janet Walton (Chairman – Borough of Poole)
Nicola Greene (Vice-Chairman – Bournemouth Borough Council)

Bournemouth Borough Council

Jane Kelly

Dorset County Council

Peter Finney


Borough of Poole

Peter Adams and Michael Brooke (Observer)

Officers:

Dr David Phillips (Director of Public Health), Jonathan Mair (Head of Legal and Democratic Services, Dorset County Council), Phil Rook (Group Finance Manager, Dorset County Council), Paul Compton (Senior Public Relations Officer), Jane Portman (Executive Director for Adults and Children, Bournemouth Borough Council), Jan Thurgood (Strategic Director – People Theme, Borough of Poole), Helen Whitby (Principal Democratic Services Officer, Dorset County Council), Nicky Cleave (Assistant Director of Public Health (Dorset)), Sam Crowe (Assistant Director of Public Health (Bournemouth)) and Sophia Callaghan (Assistant Director of Public Health (Poole)).

(Notes:(1) In accordance with Rule 16(b) of the Overview and Scrutiny Procedure Rules the decisions set out in these minutes will come into force and may then be implemented on the expiry of five working days after the publication date. Publication Date: **19 November 2013**.

(2) The symbol () denotes that the item considered was a Key Decision and was included in the Forward Plan.

(3) These minutes have been prepared by officers as a record of the meeting and of any decisions reached. They are to be considered and confirmed at the next meeting of the Cabinet to be held on 4 February 2013.)

Election of Chairman

Resolved

24. That Janet Walton be elected Chairman for the meeting.

Appointment of Vice-Chairman

Resolved

25. That Nicola Greene be appointed Vice-Chairman for the meeting.

Apology

26. An apology for absence was received from Jill Haynes, Dorset County Council.

Code of Conduct

27. There were no declarations by members of disclosable pecuniary interests under the Code of Conduct.

Minutes

28. The minutes of the meeting held on 24 July 2013 were confirmed and signed.

Matters ArisingTerms of Reference – Minute 5

29.1 With regard to whether the terms of reference had been amended to allow for future development of the Joint Board's work, it was confirmed that this request had been noted.

29.2 In response to questions it was noted that reserve members should be executive members of the appropriate council and that Blair Crawford had been appointed as reserve member for Bournemouth Borough Council.

Forward Plan of Key Decisions

30.1 The Joint Board considered their Forward Plan, which identified key decisions to be taken by the Joint Board and items planned to be considered in a private part of the meeting. The current plan was published on 5 October 2013 and included items on the agenda for this meeting.

30.2 As the Forward Plan was being developed, the Director of Public Health distributed copies of a suggested list of core agenda items, in addition to financial and budgetary information, which the Joint Board might consider in future. This included items such as national policy development and practice guidelines, commissioning plans, locality projects and outcomes from policy development panels or reviews undertaken. It was suggested that the format of the Forward Plan be reviewed. The Assistant Director of Public Health (Dorset) added that a Drug and Alcohol Team update would need to be added to the Forward Plan.

30.3. It was suggested that the list of paragraphs defining the reasons for the exclusion of the press and public from meetings be extended but the Head of Legal and Democratic Services explained that the seven listed paragraphs were statutory exemptions. They were the only circumstances under which the press and public could be excluded from meetings and were considered to be sufficiently wide to cover all situations in which the Joint Board would need to meet in private.

Noted **Draft Estimates 2014/15 and Financial Report September 2013**

31.1 The Joint Board considered a report by the Director for Corporate Resources, Dorset County Council, which set out the draft revenue estimate for Public Health for 2014/15 and the latest forecast for the budget for 2013/14. The Public Health Grant figure for 2015/16 was not yet known.

31.2 The Joint Board noted that the three local authorities had signed a shared agreement for three years and that Public Health money had been ring-fenced during this time. There was a projected underspend of £1.3m for the current year but there was a risk that spend on the sexual health contracts and healthchecks in relation to cost and volume may reduce the underspend to approximately £1m by the year end.

31.3 With regard to the number of healthchecks undertaken, the Joint Board noted that at the end of Quarter 2, 8,500 had been completed across Bournemouth, Dorset and Poole and this could rise to as many as 20,000 in total for the year. This was the only area

in Wessex which had shown an increase in the number of healthchecks undertaken during Quarters 1 and 2. The Joint Board noted that any increase in the number of healthchecks completed would reduce the projected underspend.

31.4 It was explained that the shared agreement was based on population and that the Joint Board would be asked to approve any budget proposals put forward by the Director of Public Health. The budget position would be clearer by the time of the next meeting on 4 February 2014 and a report on possible uses for any potential underspend would be provided at that time. It was suggested that any underspend be transferred to a ring-fenced public health reserve until such time as the year end position was confirmed and the Joint Board had agreed how it should be spent.

31.5 The budget for 2014/15 was £27.2m (plus £20.095 for the Joint Budget), an increase on the previous year of £1.27m. Details of how this was allocated were set out in Appendix 1 of the report. The Joint Board noted that during the 2014/15 financial year, more efficient ways of commissioning services would be explored in order to provide value for money and better outcomes for residents. The Joint Board would be asked to consider priorities for 2014/15 in due course.

31.6 The Director of Public Health highlighted the need for fundamental changes to the current service model in order to ensure sustainability and the equitable delivery of public health outcomes in the most efficient and effective way. The report set out two goals which had been identified for the following year to support this transition and to address gaps or poor outcomes, including inequalities. He then emphasised the need for mandatory programmes in 2014/15 to be equitable, efficient and effective and explained proposals which he hoped would address this. He also intended to roll out current best practice across all three local authorities.

31.7 One member attributed the potential underspend to effective joint working and asked whether other local authorities had been as successful. She drew attention to the need for sustainability as it was likely that the current ring-fencing of funding would not continue. This meant that there was even greater need for robust contract management and price control and for good practice to be embedded. The Group Finance Manager confirmed that discussions were to take place with providers about costs to ensure good value for money was obtained. The Director of Public Health added that many Local Authorities had also underspent, so Dorset was not alone in this. Dorset had taken a cautious approach during the current year so that an idea of the real level of spend could be gained. It was suggested that any references to the current budget situation be treated carefully so as not to give the public the wrong impression.

31.8 Concern was expressed about having a large commitment to one provider and the need for a strategic approach to service provision and attention was drawn to the need for additional staff to be employed to review or re-negotiate current contracts to ensure value for money. The additional cost would affect the level of underspend.

Recommended

32. That the draft estimates for 2014/15 be recommended to partner councils for consideration.

Resolved

33.1 That any underspend be transferred to a public health reserve until the year end position was confirmed.

33.2 That a pan-Dorset review of the Drug and Alcohol Teams and use of the pooled Treatment Budget in order to gain further efficiencies for the 2015/16 budget be agreed.

Reason for Decisions

34. Close monitoring of the budget position was an essential requirement to ensure that money and resources were used efficiently and effectively.


Governance arrangements for Pan Dorset Drugs and Alcohol Commissioning in Bournemouth, Dorset and Poole

35.1 The Joint Board considered a report by the Director of Public Health which set out existing governance arrangements for the three Drug and Alcohol Action Teams and recommended the establishment of a Pan-Dorset Drugs and Alcohol Commissioning Strategy Group (the Group) to focus on overarching commissioning decisions, and to identify areas for joint working, sharing of resources and expertise.

35.2 The Assistant Director of Public Health (Dorset) explained that a Pan-Dorset approach to the commissioning of drug and alcohol services was being recommended as a more effective use of resources. This would involve the establishment of a new Group. The report set out the proposed Terms of Reference, objectives and membership for this Group, and sought the Joint Board's views on the chairmanship and provision of secretariat. The introduction of a single Group would make decision-making easier and help reduce the likelihood of duplication.

35.3 Members supported the establishment of joint arrangements as long as local delivery remained the priority based on local need. They noted that the joint arrangements would need to be agreed before scrutiny arrangements could be considered but asked that the work on scrutiny arrangements would not delay progress.

35.4 It was highlighted that members were not involved in the current working arrangements, nor were they included in the proposals. There was discussion about the benefits of member involvement and the need to balance this with keeping the membership of the Group at a manageable level. It was also suggested that Dorset Police should be represented on the Group.

35.5 In order to progress the matter, Strategic Director – People Theme, the Borough of Poole, offered to liaise with her colleagues across the three authorities to review the proposed membership and member involvement.

35.6 The Joint Board suggested that the Assistant Director of Public Health (Dorset) act as Chairman for the new Group and supported the Public Health Team providing the secretariat support.

Resolved

36.1 That the recommendation to establish a Pan-Dorset Drugs and Alcohol Strategic Group be approved.

36.2 That the terms of reference and proposed membership be reviewed as set out in minute 34.5 above.

36.3 That the Assistant Director of Public Health (Dorset) act as Chairman of the Strategy Group.

36.4 That the Public Health Team provides secretariat support to the Strategy Group.

Reason for Decision

37. The transfer of public health to local authorities provided the opportunities to strengthen the existing governance arrangements and to make sure that they were appropriate to reflect the new pan-Dorset public health structure.

Board Development – Workshop 27 September 2013

38.1 The Joint Board received an oral update from the Director of Public Health on the workshop held on 27 September 2013.

38.2 The workshop had provided an introduction to the work of Public Health, both nationally and locally, an opportunity to identify local issues for future consideration and enabled development of the programme for 2014/15.

Noted**Communications Strategy 2013/14**

39.1 The Joint Board considered a report by the Director of Public Health on the communications strategy 2013/14.

39.2 The Senior Public Relations Officer explained that the communications teams from the three local authorities had been involved in the development of the strategy. He then summarised its contents. He acknowledged the lack of member involvement in the process but confirmed that members would be fully engaged in the development of the following year's strategy.

39.3 In response to a question, it was explained that the strategy was comprehensive and included the use of social media in order to provide the widest web resource possible. It also included use of the best ways of targeting residents as identified by the individual councils. One member referred to the need for the councils to develop a comprehensive database and it was confirmed that this was in the process of being set up. The Director of Public Health added that work undertaken by the three local authorities would inform the establishment of the database which would inform behaviours and help identify outcomes.

Resolved

40. That the content of the Communications Strategy be agreed.

Reason for Decision

41. Protect and enrich the health and wellbeing of Dorset's most vulnerable adults and provide innovative and value for money services.

Public Health Branding

42.1 The Joint Board considered a report by the Director of Public Health on the development of a Public Health brand, brand guidelines and preferred logo.

42.2 The Senior Public Relations Officer stated that the development of Public Health branding had been a key priority. He explained how branding had been developed, how logo options had been identified and shortlisted, and how the suggested logo had been chosen. Brand guidelines had been developed which followed national guidance and best practice and which would guide when and how the logo, font, colours and strapline should be used. The three authorities had been fully involved in the process which had a total cost of £929. Members were provided with copies of the suggested branding options on a white background so that they could see the full effect.

42.3 Members considered it important for the public to be aware of both the joint working arrangements and the individual identity of each partner authority and asked that the strapline be reviewed to include reference to this. The Head of Legal and Democratic Services added that the Joint Board's reports would reflect the branding once it had been agreed.

Resolved

- 43.1 That the brand guidelines as set out in Appendix 2 of the report be approved.
43.2 That the logo be approved, subject to the change noted in minute 41.3 above.

Reason for Decisions

44. To present one brand to reinforce and strengthen the partnership.

Local Authority Updates

45.1 The Joint Board received the minutes of Bournemouth Borough Council's Health and Adult Social Care Overview and Scrutiny Panel held on 18 September 2013, the minutes of Dorset County Council's Public Health Overview Committee held on 8 October 2013 and the draft minutes of the Borough of Poole's Children's and Young People Overview and Scrutiny Committee meeting held on 10 September 2013.

45.2 The Joint Board noted the different approaches of the three local authorities to Public Health.

45.3 The Head of Legal and Democratic Services added that he was in discussions with colleagues at Bournemouth Borough Council and the Borough of Poole on the future working arrangements at overview committee level. This work would also include joint scrutiny arrangements.

Noted

Questions

46. No questions were asked by members under Standing Order 20(2).

Exempt Business

Exclusion of the Public

Resolved

47. That under Section 100A (4) of the Local Government Act 1972, the public be excluded from the meeting for minute numbers 48 to 50 because it was likely that if members of the public were present, there would be a disclosure to them of exempt information as defined in the paragraphs indicated of Part 1 of Schedule 12A and the public interest in withholding the information outweighed the public interest in disclosing that information

Options for the Provision of Inpatient Detoxification in Bournemouth, Dorset and Poole (paragraph 3)

48.1 The Joint Board considered an exempt report by the Director of Public Health on options for the provision of inpatient detoxification in Bournemouth, Dorset and Poole.

48.2 The Assistant Director of Public Health (Dorset) described the current inpatient detoxification provision and the findings of a recent needs assessment which had been undertaken to assess future capacity requirements and equity of provision pan-Dorset. The results and future options were explained.

48.3 Having considered the information provided, members supported the suggested approach.

Resolved

49. That further development of the commissioning intentions by evaluating the options be approved.

Reason for Decision

50. The evidence from work to date suggested that there was overprovision of inpatient detoxification currently and that the current model did not represent value for money.

Meeting duration: 2.15pm to 4.10pm