

Joint Public Health Board

Minutes of a meeting held at the County Hall,
Dorchester on 3 February 2015.

Present:-

Colin Jamieson (Chairman – Dorset County Council)
Janet Walton (Vice-Chairman – Borough of Poole)

Bournemouth Borough Council
Blair Crawford and Jane Kelly


Dorset County Council
Jill Haynes and Rebecca Knox (for part)

Officers:

Dr David Phillips (Director of Public Health), Phil Rook (Group Finance Manager, Dorset County Council), Paul Compton (Senior Public Relations Officer), Nicky Cleave (Assistant Director of Public Health (Dorset)), Sam Crowe (Assistant Director of Public Health (Bournemouth)), Vicki Fearne (Consultant in Public Health), Kate Harvey (Consultant in Public Health), Dr Jane Horne (Consultant in Public Health) and Helen Whitby (Principal Democratic Services Officer, Dorset County Council).

Paul Kimber, County Councillor for Portland Tophill also attended.

(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: **10 February 2015**.

(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 Joint Public Health Board to be held on **8 June 2015**.)

Election of Chairman

Resolved

1. That Colin Jamieson be elected Chairman for the meeting.

Appointment of Vice-Chairman

Resolved

2. That Janet Walton be appointed Vice-Chairman for the meeting.

Apologies for Absence

3. Apologies for absence were received from Nicola Greene (Bournemouth Borough Council), Karen Rampton (Borough of Poole), Jane Portman (Executive Director for Adults and Children, Bournemouth Borough Council), Jan Thurgood (Strategic Director – People Theme, Borough of Poole), Janet Dover (Observer for Dorset County Council), Catherine Driscoll (Director for Adult and Community Services, Dorset County Council) and Sara Tough (Director for Children's Services, Dorset County Council).

Code of Conduct

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

Public ParticipationPublic Speaking

5.1 There were no public questions received at the meeting in accordance with Standing Order 21(1).

5.2 There were no public statements received at the meeting in accordance with Standing Order 21(2).

Petitions

5.3 There were no petitions received in accordance with the County Council's petition scheme at this meeting.

Minutes

6. The minutes of the meeting held on 6 November 2014 were confirmed and signed.

Forward Plan of Key Decisions

7.1 The Joint Board considered their draft 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 draft plan would be published on 5 May 2015 and included items on the agenda for the meeting on 8 June 2015.

7.2 The Director of Public Health explained that following concerns expressed at previous meetings, the Forward Plan now contained more information about consultation to be undertaken with future agenda items. Councillors welcomed this improvement.

Noted**Bournemouth Health and Adult Social Care Overview and Scrutiny Committee Task and Finish Group Final Report – Public Health Transition**

8.1 The Joint Board considered a report by the Director of Public Health which summarised the work of the Task and Finish Group set up by Bournemouth Borough Council to look at Public Health Transition and which sought endorsement of a number of recommendations.

8.2 The Assistant Director of Public Health (Bournemouth) explained that the Task and Finish Group had reviewed how well Public Health had integrated with Bournemouth Borough Council during the first year of transition and outlined the Group's recommendations. With regard to the robustness of the hosted model of service, he explained that Assistant Directors of Public Health (ADPH) currently worked in Bournemouth, Dorset or Poole for part of their time, with the majority being spent on pan-Dorset work. He hoped that as time progressed Public Health duties would become an integral part of the work of the three local authorities. In Bournemouth Borough Council a health and wellbeing framework had been developed which linked Public Health and the service directory to support decision making. It was hoped that a similar approach would be developed in Dorset, Poole and the District and Borough Councils. The Director of Public Health considered the current model to be resilient and provided sufficient flexibility to meet the needs of the service. With regard to integration, he explained that a model was currently being trialled in Bournemouth and, if successful, would be rolled out in Dorset and Poole.

Details would be provided at the next meeting. He added that it was his intention to trial models in one authority prior to them being rolled out across the other two.

8.3 Councillors fully supported steps being taken to integrate Public Health work into all departments of the three local authorities and recognised that as the role of Public Health had developed and progressed, the public were becoming more aware of its existence.

8.4 The Director of Public Health explained that Dorset was the only area in the Country where two unitaries and a two tier council had joined together and he had wanted to ensure that Public Health responsibilities were managed effectively and within budget. This had been achieved, providing confidence, a position of strength and ensuring better engagement in future.

8.5 One of the Dorset County Councillors drew attention to the fact that none of the County Council's Overview Committees had received updates on Public Health since it had been included in their terms of reference. The Assistant Director of Public Health (Dorset) agreed to provide updates for the next round of meetings.

Resolved

9.1 That the report be noted.

9.2 That an update report on Public Health be provided for the County Council's Overview Committees.

Drug and Alcohol Commissioning in Bournemouth, Dorset and Poole

10.1 The Joint Board considered a report by the Director of Public Health which presented the finalised business case for drug and alcohol commissioning in Bournemouth, Dorset and Poole.

10.2 The Assistant Director of Public Health (Dorset) reminded the Joint Board that at their last meeting they had supported the recommended commissioning option in principle but had asked to see the finalised business case which was set out in Appendix 1. The report also set out draft terms of reference for the pan-Dorset Drug and Alcohol Services' Governance Board (Appendix 2) and sought authority to develop a scheme of delegation from the Joint Board to the Governance Board to ensure that clear and appropriate lines of responsibility were in place.

10.3 Councillors then discussed the proposed working arrangements. As the Joint Board's role was to scrutinise working arrangements and outcomes they did not see any merit in them receiving the minutes of Governance Board meetings. The Joint Board did, however, need to ensure that the working arrangements were robust and working satisfactorily so they asked to review them after six months. They also asked that appropriate Heads of Service be invited to attend when working arrangements were reviewed. The Group Finance Manager cautioned that the working arrangements would need to comply with the terms of the Public Health Grant.

Resolved

11.1 That the business case with the expectation that the changes will be implemented in April 2015 be approved.

11.2 That the working arrangements be reviewed after six months and that appropriate Heads of Service be invited to attend this meeting.

11.3 That proposals for a scheme of delegation from the Joint Public Health Board to the new Governance Board for consideration at a Joint Public Health Board meeting in June 2015 be developed.

Reason for Decisions

12. The Pan-Dorset Drug and Alcohol Commissioning Strategic Group have considered the business case and recommend that the changes outlined within the report will give a good balance between centralisation of commissioning to deliver efficiencies whilst maintaining an appropriate focus on local needs.



Medium Term Savings Plan

13.1 The Joint Board considered a report by the Director of Public Health which outlined the rationale for, and content of, the proposed investment of savings in 2015/16 and 2016/17. It suggested a clear and consistent approach to the use of these savings which would constitute a more sustainable approach to improving core public health outcomes.

13.2 Councillors were reminded that at the last meeting, they had agreed that savings totalling £1.4m from the 2013/14 budget could be reinvested in public health priorities for the three local authorities. They had also agreed to the possibility of maintaining year on year savings being explored and how these could be used to best effect. The report suggested that up to £1m savings could reasonably be achieved for the years 2015/16 and 2016/17 and that after analysis of current activity and priorities within the public health outcomes framework this should be used by the three local authorities in support of their early years/children's agenda and health protection.

13.3 The Director of Public Health informed the Joint Board that Public Health England's Chief Executive was to visit Public Health Dorset in March 2015. He hoped the financial approach taken would demonstrate that resources were being used efficiently and effectively to bring about health improvements. He then explained how and why the early years/children's agenda and health protection areas had been identified for investment and would provide Councillors with a copy of the outcome of the Public Health Stocktake.

13.4 Councillors were pleased that year on year additional savings could be made to spend on priority areas. They were concerned that Health Protection services should be in place for when they were needed and it was suggested that families be included in the investment in early years/children's agenda. It was also suggested that consideration be given to the mental health needs of children and young people as these were given little recognition, seemed to be under-funded and early intervention might lead to savings in the longer term and help the young people fulfil their potential. The Director of Public Health explained that a report on school nurses would be provided for the next meeting and this would include information about the emotional wellbeing of children and young people. The Assistant Director of Public Health (Bournemouth) referred to current work by the Public Health Team to identify mental health programmes which worked, to understand how schools responded to mental health needs, given that more were becoming academies, and to look at Dorset Healthcare University NHS Foundation Trust's (DHUFT) current investment in the CAMHS service and whether this was meeting young people's needs.

13.5 With regard to how the Joint Board could convey their concerns to DHUFT, it was noted that Dorset's Health and Wellbeing Board were now holding themed meetings and that this would provide a multi-agency environment in which to raise them.


13.6 In response to a question about Environmental Health capacity and how this would be improved, the Director of Public Health explained that at the time of the recent E coli outbreak in Blandford and other parts of all three authorities there had been very limited Public Health England capacity to help the local Environmental Health staff to deal with the practical aspects of investigation on the ground. He hoped that proposed investment and better co-ordination would result in improved health protection capacity.

Resolved

14. That the division of up to £1million savings in years 2015/16 and 2016/17 equally between the early years/children's agenda and Health Protection.

Reason for Decision

15. To ensure a sustainable and consistent approach to savings redeployment and thereby maximise return on investment.

 **Budget Monitoring 2014/15 and Financial Update**

16.1 The Joint Board considered a report by the Chief Financial Officer, Dorset County Council, which provided an update on the budget position in 2014/15 and the Public Health Grant for 2015/16.

16.2 The Group Finance Manager presented the report highlighting the current projected underspend of £1m for 2014/15, the increased Public Health Grant of £20.4M due to the transfer of money to the public health reserve and the proposed use of future savings in 2015/16 and 2016/17 to support local authorities with their work on Public Health priority areas of the early years/children's agenda and Health Protection.

Resolved

17. That the use of the forecast underspend for 2014/15 and 2015/16/17 be agreed.

Reason for Decision

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

 **Transfer of 0-5 Children's Public Health Commissioning**

19.1 The Joint Board considered a report by the Director of Public Health which provided an update on the transfer of 0-5 children's public health commissioning to local authorities.

19.2 The Consultant in Public Health presented the report confirming that Public Health was only responsible for the commissioning of health visiting services. From April 2015 Public Health Dorset would co-commission services with NHS England and take full responsibility for it on 1 October 2015. The transfer would be overseen by a group established by NHS England to ensure the transfer was successful, this being a priority for the three local authorities. The current spread of health visitors might need to change to reflect areas of greatest need.

19.3 With regard to whether any action had been taken to engage Health Visitors with children's centres, the Consultant in Public Health explained that this could be considered by a Task and Finish Group which was being established to look at the relationship between health visitors and children's centres.

19.4 The Joint Board noted that the main employer of health visitors was Dorset Healthcare University NHS Foundation Trust and that future funding allocations for the commissioning of health visiting were expected to be based on a needs based formula.

Resolved

20. That the progress on the transfer of health visitors be noted.

Reason for Decision

21. Additional statutory commissioning responsibility of Health Visitors transferring to Local Authorities from the NHS in October 2015.

Updates on Key Commissioning DevelopmentsNHS Healthcheck Programme Update and Health Improvement Commissioning Update

22.1 The Joint Board considered a report by the Director of Public Health which provided brief updates on specific commissioning developments and highlighting areas of continued focus, picking up on emerging issues and marking specific proposals for future action.

NHS Healthcheck Programme Update

22.2 The Assistant Director of Public Health (Bournemouth) highlighted performance in Bournemouth, Dorset and Poole for the number of healthchecks carried out and explained that efforts were being focused on improving the number offered in areas of greatest need. He referred to steps being taken to improve the quality of healthcheck information received from GP practices, steps being taken to improve equity of provision across the area and how GP practices were being encouraged to collaborate as a means of reducing costs. He also referred to work being undertaken with other public health teams in Wessex on standardisation of responses to healthchecks where patients were found to be at higher risk of cardio-vascular disease. The Board would continue to receive regular updates.

22.3 Councillors welcomed the progress made and asked that efforts continue to encourage other GPs to provide this service and to work collaboratively to reduce costs and provide a more flexible service to the public. They also highlighted the importance of establishing what happened following the healthchecks when patients were identified as having needs.

Health Improvement Commissioning Update

22.4 The Assistant Director of Public Health (Bournemouth) reported that the tender for the provision of the Health Improvement Hub had been awarded to Optum Health Solutions. They would in the first instance adopt the existing "payment by results" model with an incentive to focus on areas of deprivation. The Hub would go live from 1 April 2015 but a Dorset base was unlikely until the summer.

22.5 In response to questions the Assistant Director of Public Health (Bournemouth) explained that the current contract was for a period of 3 years with the option for a further four year period, with break points. Currently it was difficult to get information about Health Improvement services from the current NHS providers but the new system would use a customer relationship management system which would provide better aggregate information, even after six and twelve months after intervention. Optum were an American Company with a good track record and had offered to develop the customer relationship management system on a pro bono basis, using their American experience to develop this and to tailor this to Dorset's needs. The Director of Public Health added the Optum bid was a consortium of representatives from the voluntary sector, academics and the NHS.

22.6 With regard to whether any thought had been given the a press release, the Senior Public Relations Officer explained that one had been issued the previous week and a communications plan would be developed. The Assistant Director of Public Health (Bournemouth) added that it had been agreed that the hub would have its own brand. The Joint Board would receive quarterly reports in future.

Resolved

23.1 That the progress in Health Checks be noted.

Joint Public Health Board – 3 February 2015

23.2 That the outcome of the procurement and plans for implementation of Health Improvement Hub be noted.

Reason for Decisions

24. To enable further development on key areas within public health and provide assurance on progress to date.

Progress report on the Procurement of an integrated sexual health service in Dorset

25.1 The Joint Board considered a report by the Director of Public Health which provided an update on progress over the last three months with the procurement of an integrated sexual health service and the way forward.

25.2 The Director of Public Health explained that an outline of the process had been considered at the Joint Board's last meeting. Since then two supplier engagement events had been held and the procurement process was going well. Approval was sought to continue the procurement process and award the contract through a formal tendering process. There were risks associated with this but steps had been taken to mitigate them. A further report would be provided at the appropriate time.

Resolved

26.1 That progress in service development for sexual health including market engagement in January 2015 be noted.

26.2 That the proposed timetable for procurement be approved

26.3 That the Director of Public Health be given delegated authority to award the contract for Sexual Health Services in Dorset,

Reason for Decisions

27. To ensure that the process for developing an integrated sexual health service can progress.

Public Health Dorset Online Strategy

28.1 The Joint Board considered a report by the Director of Public Health on the Dorset Online Strategy which set out the plans for developing online and digital tools to support Public Health Dorset's work and communications strategy.

28.2 The Senior Public Relations Officer presented the report which explained how tools would be developed which would channel people to the appropriate services commissioned by Public Health Dorset and allow staff, professionals and academics to have access to information and intelligence. Social media would play a crucial part in its development. A tender exercise would be undertaken to identify a preferred supplier to help develop the web presence.

28.3 In response to a question about the date for implementation, the Joint Board noted that online tools were currently being developed and it was anticipated that these would be on line over the summer. The Chairman asked for a report to the next meeting on the project plan, including milestones and go live date.

28.4 The Vice-Chairman drew attention to the Borough of Poole's Family Information Directory with the request that a link between this and the Public Health website be developed.

Resolved

29. That a further report be provided for consideration at the next meeting which would include a project plan, including milestones and a go live date.

Reason for Decision

- 30.1 Protect and enrich the health and wellbeing of Dorset's most vulnerable adults.
- 30.2 Provide innovative and value for money services.

Performance Report 2014/15

31.1 The Joint Board considered a report by the Director of Public Health which updated them on progress against the agreed commissioning intentions by programme and the most recent NCMP data.

31.2 The Director of Public Health presented the report drawing attention to the national child measurement data contained in Appendix 2. This indicated that nationally the number of children overweight and obese had increased and gave information to compare with children in District and Borough Council areas. Weymouth and Portland was identified as an area of concern as the number of overweight and obese children of Reception age were above the national average. However, the number of children in Year 6 who were overweight or obese was less than the national average. More information would be provided for the Joint Board's next meeting and for the Joint Board's Task and Finish Group on Obesity.

31.3 One Councillor questioned the validity of the data in Appendix 2, particularly with regard to figures for the Weymouth and Portland area. It was noted that this information was provided nationally and that this picture was consistent with previous years. As figures related to a small population, figures could show dramatic changes.

31.4 The County Councillor for Portland Tophill, who sat on the Task and Finish Group on Obesity, asked that the youth service be included in the Group's work. It was explained that this was a matter for the Group to decide. The Joint Board would consider the Group's recommendations at a future meeting.

Resolved

32. That the progress against the milestones for the various programmes as per the updated commissioning intentions workplan be noted.

Reason for Decision

33. Assurance of progress for the Board.

Local Authority Updates

34. The Joint Board considered a report by the Director of Public Health which presented the minutes of the meeting of Bournemouth Borough Council's Health and Adult Social Care Over view and Scrutiny Panel on 4 December 2014. The Director of Public Health did not highlight any issues arising from the minutes for the Joint Board to consider.

Noted**Questions**

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