



Joint Public Health Board

Minutes of the meeting held at the Town Hall, Bournemouth
Borough Council, Bournemouth on Monday, 6 June 2016.


Present:

Councillor Jane Kelly (Chairman)
Councillor Jill Haynes (Vice-Chairman)

Members Attending

Councillor Nicola Greene - Bournemouth Borough Council
Councillor Colin Jamieson – Dorset County Council
Councillor Mohan Iyengar – Borough of Poole

Officer Attending: Sophia Callaghan (Assistant Director of Public Health - Poole), Sam Crowe (Assistant Director of Public Health - Bournemouth), Jane Horne (Consultant in Public Health), Rachel Partridge (Assistant Director of Public Health), David Phillips (Director of Public Health) and Katherine Harvey (Consultant).

- (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: **Monday 13 June 2016.**
- (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 Board to be held on **Monday, 19 September 2016.**)

Chairman

1 **Resolved**

That Councillor Jane Kelly be elected Chairman for the meeting, in accordance with Board's procedures.

Vice-Chairman

2 **Resolved**

That Councillor Jill Haynes be appointed as Vice-Chairman for the meeting.

Apologies

- 3 Apologies for absence were received from Councillor Rebecca Knox (Dorset County Council) and Councillors Drew Mellor, Karen Rampton, and Mike White (reserve) (Borough of Poole).

It was noted that Councillor Colin Jamieson (Dorset County Council) and Councillor Mohan Iyengar (Borough of Poole) attended as reserve members.

Code of Conduct

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

Minutes

5 **Resolved**

That the minutes of the meeting held on 8 February 2016 be confirmed and signed.

Public Participation

6 There were no public questions or statements received and no requests to present petitions.

Forward Plan of Key Decisions

7 The Board considered its Forward Plan, which identified key decisions to be taken by the Board at future meetings.

The current version was published on 6 May 2016 and provided details of the key decisions due to be taken at the meetings on 19 September and 21 November 2016. It was noted that there were currently no items planned to be considered in private session.

The Director of Public Health reported that the item to be considered at the September meeting on '2016/17 Delivery – Commissioning and Performance Indicators' should include an additional bullet point on 'Children and young people health visiting', as agreed at the previous meeting.

Resolved

That the Forward Plan be agreed to include the amendment proposed by the Director of Public Health.

Strategic Direction - 2016 to 2019 / Public Health Dorset Work Plan 2016-18

8 The Board considered a report by the Director of Public Health on Public Health Dorset's business plan and priorities for 2016-18. The report was accompanied by a presentation from the Director which provided background to the current position and identified the main challenges and opportunities going forward.

The Board was reminded that Dorset was one of the lowest funded areas for public health in the country and needed to achieve savings of 20% by 2020. The Director outlined some of the achievements over the last three years in respect of effective contract and budget management, improved efficiency and equity across programmes, and building population health into corporate working and supporting transformation / innovation.

The Director explained the challenge going forward not only in financial terms but in terms of better aligning public health activities with other systems and local initiatives e.g the STP and 'prevention at scale'. The presentation provided a breakdown of the main factors contributing to ill health/early death and an illustration of factors that were important in ensuring that the best value for money was achieved e.g need, spend outcomes and impact of activity.

The Director responded to questions from Board members and the main points raised in the discussion included:

- The importance of the prevention agenda and the need to take a joined up approach.
- The role of the Health and Wellbeing Board in taking up the issue of gaps in care under the Prevention at Scale agenda.
- The promotion of resilience and good mental health through the life course – recognising poor mental health as underlying some of the factors contributing to the burden of disease.
- The contribution of air pollution to the burden of disease was surprising for some Board members. Members commented on the complexity of the issues and cited an example of planning guidance which encouraged, or in some

cases required, high density housing to be built near major public transport routes and the impact this could have on health and potential solutions to this.

- Members commented that although the outcomes for some areas. e.g sexual health were good, there was a real need to be more efficient and effective in delivering services in order to best meet need and deliver outcomes across the system.

Resolved

That the Board note the priorities, ambitions and strategy set out in the summary of the business plan and approves the direction of travel for Public Health Dorset over the next two years.

Health and Wellbeing Framework

- 9 The Board considered a report by the Deputy Director of Public Health detailing the Health and Wellbeing Framework and what this entailed. Reference was made to a report to the Board in November 2015 identifying how best to integrate public health goals across Council services.

The Director responded to questions from the Board and the main points raised in discussion were:-

- The need for a more comprehensive understanding of public health amongst District Council colleagues. Whilst Public Health Dorset had achieved a considerable amount with District and Borough Councils on specific topics and key professional groups e.g. to improve standards of housing and work with the environmental health teams, there was the potential to develop the relationship, especially with members.
- Boscombe Regeneration Partnership Board was cited as a good model of public health engagement in a multi agency place- based project, and lessons and links to key officers from this were now being used to develop the Melcombe Regis Strategic Partnership.
- A more prominent role for communication in prevention e.g. training people on mental health issues. This was more difficult to undertake in rural areas. It was noted that Dorset Community Action was looking to arrange training sessions.
- Consideration given to a comment from Cllr Iyengar on the drawback of paying service providers on results, which meant that easier goals could be “cherry picked” and could limit the market for suppliers.

Resolved

That the Board approves the development of a generic Health and Wellbeing Framework pan Dorset.

Performance Update and Overview of Commissioning Plans 2016/17

- 10 The Board considered a report which provided a Performance Update and an Overview of Commissioning plans 2016/17. The Board’s attention was drawn to paragraphs 2.7 – 2.10 and 3.4 – 3.5 in particular. Officers explained that sexual health services needed urgent action for the reasons set out in report, the main issues being that:

- Public Health Dorset did not transfer the reduction to any providers in 2015/16, which was an unsustainable position, given savings of 20% were required by 2020;
- the non-compliance with EU/UK legal requirements on tendering;
- the cessation of “ring fence” arrangements for the public health budget from April 2018 and the lack of any central grant from 2020.

The Director responded to questions from Board members, the main points raised in the discussion centred around whether the Board should take a formal view on the

next steps for future commissioning arrangements. Points which were made included:

- formal legal advice had not routinely been sought on non-compliance issues, but it was noted that the issue had been documented and was subject to a Monitoring Officer report to Dorset County Council;
- it was noted that there were now block contracts in place for 2016;
- some service models had not evolved to reflect current needs;
- there was general agreement that public health grant needed to be viewed in its entirety in terms of savings. Whilst it was recognised that this was a challenging area to renegotiate, there was a requirement to do this.

The Board decided not to take formal view for the following reasons:-

- because the report was for noting and did not form part of the recommendation, and
- because members felt comfortable that the way forward was already set out in the financial report to be considered later in the meeting in so far as them taking into consideration paragraph 4.2 as follows:

‘While continuing to pursue further efficiency gains through recommissioning the service, we will look to restructuring public health activity and spend to provide as much convergence with other local authority priorities as practical’.

With regard to health checks, the Deputy Director of Public Health updated on the current position, this being:-

- GPs were not participating in health check invitations in two areas where tenders awarded to Boots plc; there were a number of factors influencing this but work was underway to try and resolve the situation. Legal advice had been sought from the County Council to manage the risk appropriately

Resolved

That the Board note the brief updates from each function area and the progress being made against agreed milestones.

Financial Report including Budget Outturn 2015/16

11 The Board considered the joint Financial Report including the Budget Outturn 2015/16 from the Chief Financial Officer and the Director for Public Health.

The Board noted that the figure given in paragraph 2.1 of the report should read *‘the draft revenue budget for Public Health Dorset in 2016/17 is £29.46m’*.

The Board received the report as set out.

Resolved

- That the approach to managing reductions in the budget based on the principles described in the report be agreed;
- That the allocations and budget for 2016/17 and for final outturn for 2015/16 be noted;
- That the transfer of the underspend into the Public Health reserve and the holding of the balance to mitigate the effect of central reductions in grant allocation be agreed.

Questions from Councillors

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

The Director of Public Health reported that the Public Health Team would be preparing a series of briefing notes and papers over the next few months and would

welcome engagement and feedback on these from members of the Board.

Meeting Duration: 10.00 am - 12.00 pm