

TOWN COUNCIL MEETING

REPORT 98/15

9 NOVEMBER 2015

The purpose of this paper is to brief Members on the issues surrounding Town and Parish Council representation within the developing arrangements for integrated delivery of the Island's Health and Wellbeing services on a Locality basis.

No. DETAIL

I) BACKGROUND

- a) The move of the My Life a Full Life Programme into working through multi-disciplinary teams in each of three Localities – North and East Wight, West and Central Wight and South Wight – was first considered by the Town Council at its meeting of 18 May 2015.
- b) After a detailed discussion of the role for Town and Parish Councils within the emerging structures it was unanimously resolved in Minute 67/15 that:
 - i) the Town Council believes that direct involvement of the Town Council with the South Wight Locality Team is justified by the Joint Strategic Needs Assessment prepared for the town by Public Health as part of the Our Place Programme;
 - ii) asks its Clerk to prepare and present the case for that involvement to the Deputy Director of Public Health as the Public Health Lead for the South Wight Locality Team; and
 - iii) approves the Town Clerk's proposal of its Community Development Officer Tony McCarthy as the Town Council's representative in that regard.
- c) A Report identifying the basis for Ventnor Town Council, through its Community Development Officer, to have a formal representative role for all 13 Town and Parish Councils in the South Wight Locality at the Locality Management Group level was presented to and approved by the Town Council Meeting of 8 June.
- d) However, there has been no change to date in the original proposal by the My Life a Full Life programme that Town & Parish Councils are to be considered as part of the Voluntary Sector and therefore to be represented by a Voluntary Sector Locality Link Officer employed by Community Action IW, Paul Savill, through quarterly meetings.
- e) The Town Clerk and Community Development Officer have attended both of those quarterly meetings held to date: the first on 15 July and the other on 8 October. Both were held at the Green Room, neither had more than 15 people present and apart from staff employed in the Health and Wellbeing services, we were the only two people present at both meetings.
- f) This paper has been prompted by Paul Savill's proposal for Terms of Reference for these quarterly meetings which, in addition to having no discrete role for Town and Parish Councils, reflect the lack of clarity and effectiveness that appears to run permeate the whole structure for Locality Working, starting at the top as outlined in the next section.

2) HEALTH AND WELLBEING BOARD

- a) Although there is still no formal, detailed structural diagram available setting out the responsibilities and accountabilities of the various elements of the structure for the delivery of Health and Wellbeing services, or the connections between them, Paul Savill's listing of them runs from the Health and Well Being Board through the My Life a Full Life Board and Locality Management Groups to Locality Health and Wellbeing Forums.
- b) The establishment of a Health and Wellbeing Board as a Committee of the Isle of Wight Council (IoWC) is a statutory duty under the Health and Social Care Act of 2012. Its meetings are held in public and its Agendas and Minutes of meetings are published on the IoWC's web site.
- According to the latest version of the IoWC's constitution dated August 2015 it is served by an Executive Group presumably what is now identified as the My Life a Full Life Board and four sub groups: Healthy Lifestyles, Community Safety, My Life a Full Life and Children and

- Young People although it is not clear if or when they meet, what their terms of reference are or who is due to attend them.
- d) The membership of the Health and Wellbeing Board is stated as including a representative of the Isle of Wight Association of Local Councils (IWALC) although no representative is listed as having attended any of its 2015 meetings.
- e) Attendance, too, is not encouraging. Apologies for absence listed for the latest meeting on the 17 September included IoWC's Managing Director Dave Burbage, the Director of Adult Social Care, Martin Elliott and the Chair and Chief Officer of the Clinical Commissioning Group (CCG) John Rivers and Helen Shields.
- f) Minute 13 of the meeting, headed *Update on Health and Wellbeing Board and Governance Review*, reveals that the lack of clarity evident throughout the structures starts here:

 Members agreed that the current governance arrangements of the Board were complex and needed review. Lack of clarity with decision making had led to a confused process. It was not clear how the Health and Wellbeing Boar related to such groups as the My Life a Full Life Board.
- g) The Board's response was to set up a workshop to be facilitated by the Local Government Association.

3) SOUTH WIGHT LOCALITY

- Within each Locality two parts of the overall structure are emerging: one for the service professionals and the other for local accountability.
- b) Although membership and responsibilities of both of these have not been clear at either of the two quarterly meetings referred to in section 1) above, Paul Savill's email of 20 October informed us that the membership of the Locality Management Group is: Dr Oommen John, the GP Lead, Anita Cameron Smith, Deputy Director of Public Health, Dr Mark Rawlinson, Lead Locality Nurse, Sharon Lock, Adult Social Care and Paul Savill, Voluntary Sector Link.
- c) The email included an attachment setting out draft Terms of Reference for the Locality Health and Wellbeing Forum that is attached to this Report.
- d) Clearly such a disparate group with a potential membership of hundreds meeting quarterly cannot be expected to provide either relevant contribution or real accountability.

4) RECOMMENDATION

The Town Council is recommended to continue to progress its proposal for direct representation of the area's Town and Parish Councils through its Community Development Officer, Tony McCarthy.



Locality Health and Wellbeing Forums

Terms of Reference

Context

The Isle of Wight is divided into three localities with a multi-disciplinary management group leading on health and well-being issues in each one.

In each locality organisations will work together around people, to provide a seamless approach to care, delivering what the individual actually needs.

Fundamental to making this work is the engagement and participation of the Voluntary and Community Sector alongside Town and Parish Councils.

The aim of this document is to design a flexible meeting structure for this diverse group to work together effectively.

Primary Purpose

To provide a mechanism for effective dialogue between Town and Parish Councils and the Voluntary and Community Sector with the My Life a Full Life (MLAFL) Locality Management Groups (LMG).

Secondary Purpose

To provide a networking and problem solving forum for the locality.

Primary Activity

To provide the attendees with the opportunity to consider, discuss and engage with the MLAFL programme and any issues surrounding health care and well-being.

To raise issues seen as a theme or trend occurring across the locality in order to influence the priority of LMG projects.

Membership

- One representative from each Town and Parish council within the locality.
- Representatives of any not for profit or non-statutory organisation based or operating
 in the locality. (an appendix with a non-exhaustive members list will be added for
 each locality)
- A representative (s) of the LMG (initially always Voluntary Sector Locality Link Officer)
- Guests from statutory bodies as required/invited

Each member is required to consult, represent and feedback for their organisation or area. It is up to each organisation to decide who its representative will be.

Frequency

Once a quarter.

Chairperson and deputy

To be appointed on an annual basis selected from the members by the members.

Secretariat and administration

To be provided by Community Action Isle of Wight

Efforts will be made to allow people to join the meeting through Skype or teleconference to be as inclusive as possible.

Venues for the meetings will be within the locality moving around to share the travelling burden.

Timings of meetings may vary to allow a cross section of the locality groups to attend

P. Savill 04.10.15