

**MINUTES OF A MEETING OF THE
HEALTH AND WELLBEING BOARD SUB COMMITTEE
HELD ON 16 NOVEMBER 2015 AT 7.00 - 8.00 PM**

Present

Nick Campbell-White	Healthwatch
Mark Cupit	Strategic Development Location Delivery
Darrell Gale	WBC Consultant in Public Health
Charlotte Haitham Taylor	WBC
Julian McGhee-Sumner	WBC
Stuart Rowbotham	Director of Health and Wellbeing
Katie Summers	NHS Wokingham Clinical Commissioning Group
Kevin Ward	Health and Wellbeing Board Partnership Groups
Dr Johan Zylstra	NHS Wokingham Clinical Commissioning Group

Also Present:

Colm Ó Caomhánaigh	Secretary
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1. APOLOGIES

No apologies for absence were received.

2. DECLARATION OF INTEREST

A declaration of interest was submitted from Dr. Johan Zylstra who declared a personal interest in the general business of the Subcommittee as a General Practitioner in the area.

3. PUBLIC QUESTION TIME

There were no public questions.

4. MEMBER QUESTION TIME

There were no member questions.

5. ELECTION OF CHAIRMAN FOR THE 2015/16 MUNICIPAL YEAR

The Secretary called for nominations for Chairman for the 2015/16 Municipal Year.

It was proposed by Katie Summers and seconded by Nick Campbell-White that Julian McGhee-Sumner be elected as Chairman for the 2015/16 Municipal Year.

It was unanimously agreed that Julian McGhee-Sumner should be elected as Chairman for the 2015/16 Municipal Year.

6. ELECTION OF VICE CHAIRMAN FOR 2015/16 MUNICIPAL YEAR

The Chairman called for nominations for Vice Chairman for the 2015/16 Municipal Year.

It was proposed by Julian McGhee-Sumner and seconded by Stuart Rowbotham that Katie Summers be elected as Vice Chairman for the 2015/16 Municipal Year.

It was unanimously agreed that Katie Summers should be elected as Vice Chairman for the 2015/16 Municipal Year.

Katie Summers told the meeting that she will be unavailable for some of the coming meetings and proposed Lois Lere as her substitute. This was agreed.

7. SECTION 106 PAYMENT TO WOKINGHAM MEDICAL CENTRE

Proposal: That the subcommittee agrees to recommend that the Executive approves the release of a capital payment of £150,000 from Section 106 to Wokingham Medical Centre as specified in the report.

The proposal to make a payment to Wokingham Medical Centre of £150,000 was introduced by Darrell Gale. He referred to a letter sent to the Centre in 2012 assuring them that the money had been allocated to them.

Nick Campbell-White asked if any conditions had been set on the payment and, if so, have the conditions been met.

Mark Cupit referred to the background to this case where two previously separate practices, based in unsuitable premises, had agreed to merge in new premises. The funding was to assist them in this and there was no need to add any conditions.

Johan Zylstra said that it would be expected that the merged practice would have an increased patient base given the new developments in the North and South Wokingham Strategic Development Locations. Julian McGhee-Sumner said the practice was also expected to extend services.

There was discussion as to whether the patient base had increased or whether new services had been provided. It was acknowledged that it was difficult to predict patient choice in this matter.

Johan Zylstra said that it was a major problem for practices that funding per capita is paid retrospectively.

Katie Summers asked if it was normal to add conditions if funds were granted in other sectors, such as for leisure facilities.

Mark Cupit said that the Council prefers to provide facilities directly where it can but the reality is that with primary care we are dependent on private practices.

Nick Campbell-White agreed that the funds should be paid since they were promised but he suggested including conditions for future payments.

RESOLVED: That the proposal be approved that the subcommittee recommends that the Executive approves the release of a capital payment of £150,000 from Section 106 to Wokingham Medical Centre as specified in the report.

8. SECTION 106 AND CIL PAYMENTS TO SUPPORT INCREASED PRIMARY CARE INFRASTRUCTURE

Darrell Gale proposed a mechanism for other funding proposals. He said that we need to take the NHS Primary Care Transformation Fund into account. Decisions

should be based on a full business case. We need to decide if conditions should be set.

Johan Zylstra said that the NHS funds are national and so practices are competing countrywide for them. They will also be linked to estate strategies. We can rely more on Community Infrastructure Levies (CILs) because these are allocated locally. He said that patients will go to existing practices and it will be difficult to get them to change later.

Katie Summers said that the original deadline for NHS funds was very short and there were only 65 successful applications nationally. They are now inviting proposals to be submitted by February 2016. Proposals must meet criteria - for example 7 day access.

Clinical Commissioning Groups (CCGs) are required to submit Primary Care Estate Strategies by December although they can be updated in February.

Nick Campbell-White said that he has spoken to various practices and that Burma Hills has closed its books at 2,200 while they could take up to 4,000 but don't have the money to fund expansion. Matthewsgreen can't take anymore. He pointed out that the Grimes Report told us what would be needed in two years and that one year had already expired.

Katie Summers said that practices don't know how to access CIL funds. We need to design a process and communicate it.

Darrell Gale said that there were separate processes for CIL and S106 funds.

Mark Cupit clarified that CIL funds can be used for infrastructure only. They are linked to the Council's capital programme and reassessed 3 times per year - the next review will be in February. The actual CIL funds are received from developers as building proceeds.

Charlotte Haitham Taylor said that the Grimes Report did not provide enough evidence to support specific proposals.

Asked if the Grimes Report was adopted by the Council, Julian McGhee-Sumner clarified that it had been 'noted'.

It was agreed that Darrell Gale and Katie Summers will work on a process for dealing with proposals and that we will try to have an extra meeting in December given the deadlines involved.

9. MAKING THE BEST USE OF COMMUNITY HOSPITALS

It was agreed to defer this item until the review of Wokingham Community Hospital is available.

10. NHS PRIMARY CARE TRANSFORMATION FUND

It was agreed that this issue had already been discussed in the context of agenda items 7 and 8.

11. WORK PROGRAMME

It was agreed that we try to have an extra meeting in December to discuss the process for dealing with proposals relating to CIL and S106 funds.

It was also agreed to discuss community hospitals at the next scheduled meeting in January assuming the review of Wokingham Community Hospital is available.