

NETWORK

NDVA's AGM & Networking Event

Some 60 groups and organisations were represented at NDVA's Annual General Meeting and Networking Event, held at Bakewell Agricultural Centre on 6th July.

Following a welcome from Sue Howard, the AGM commenced with approval of the Minutes of NDVA's first General Meeting held in April 2010 (when NDVA replaced North Derbyshire Voluntary Action)

In his Chief Officer overview of the year, David Timcke risked stating the glaringly obvious by reminding the Forum that it had been a challenging time for the Voluntary and Community Sector, including NDVA, with much uncertainty. It appeared to be a year when there were more questions than answers!



NDVA's Annual General meeting

NDVA staff had continued to use their wide ranging contacts, particularly with the Primary Care Trust, Derbyshire County Council (DCC), local MPs etc to gather news and information to pass on to our members and to represent their views. We also worked closely with other support and infrastructure organisations - 3D, DCAN etc.

David said it was impossible to predict what may come from Events such as this. Last year, as we were clearing up from the Networking Event and getting ready to return to the office, he spotted an informal discussion taking place between NDVA staff and Sandy

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AGM & Networking Event

Marshall (then employed by DCC Adult Care) As a result of this and a lot of follow-up planning, we jointly ran a series of highly acclaimed 'personalisation and direct payment workshops' around the County. So well done to Sandy, DCC and our NDVA staff.

The year had seen NDVA undertake much needed improvements to its IT hardware, replacing old equipment and cabling. (In 2011 / 12 NDVA is planning to replace its website, with one allowing frequent updates - and with inter-active facilities for the benefit of NDVA members.)

Last year was the final, third year of the Derbyshire LINK contract and staff undertook a range of engagement activities including several large and well attended public events in Chesterfield, Derby and Marehay (near Ripley). However, following discussions between DCC and the co-hosts (NDVA and Amber Valley CVS), the LINK contract was extended into 2011, so we are well placed to see LINK go through the transition into Healthwatch in 2012.

David told the Forum that, during a long working life, and one that encompasses the private, public and voluntary sectors, he had come across no more dedicated and hard working a team of staff than NDVA's (and their colleagues in Derbyshire LINK). There is an incredible amount of work that goes into planning events of this kind – and for this to be accomplished by so few people is amazing. He was both grateful for their commitment and proud to work with them. He also paid tribute to the Board of Directors (Trustees), who have a broad breadth of experience of the Community and Voluntary Sector. They are a very real asset to NDVA. David said he was grateful to them for their counsel and support.

Finally, David mentioned another 'group' deserving special mention..... the community groups and voluntary organisations that form the membership of NDVA! Despite all the challenges and uncertainty, often with limited funding and recognition, these groups and organisations continue to support communities and individuals whose lives would be so much the poorer without them.



Teddi Carlson (with Sue Thickett)

Following presentation of the annual accounts by Teddi Carlson, the AGM voted in favour of continuing to use the services of Barber Harrison and Platt as auditors to NDVA.

A copy of the annual report and accounts has been placed on the NDVA website (www.ndva.org.uk). To request a hard copy, please contact us on 01246 555908 or email: info@ndva.org.uk

Election of Board of Directors

The AGM voted unanimously to re-appoint to the Board of Directors:

- Sue Howard
- Roland Brown
- Teddi Carlson
- Ann Sullivan
- John Wardle
- Heather Fawbert
- Jackie King-Owen

The meeting also voted unanimously to appoint two new Board members:

- Lynn Tory (Chesterfield Relate)
- Dawn Longden-Whiting (Making Space)

The first meeting of the Board following the AGM will elect honorary officers (Chair, Vice-Chair and Treasurer)

Update from Resources & Issues Group (RIG)

Heather Fawbert explained that issues from the Forum are taken forward at the RIG meetings. In January the Group had met with MPs Natascha Engel and Dennis Skinner and have since met with Toby Perkins.



Heather Fawbert

Helen Beardmore from the Derbyshire Times came to talk to the RIG to give tips on how to talk to journalists.

Heather reminded the meeting that, if organisations have any issues they would like raised at the RIG meetings they should contact Jacqui Willis at NDVA.

Digital Outreach Project

Julie Akino, Age UK Derby and Derbyshire, explained that she is going round local groups telling people about the Digital Switchover. She is available to give a talk to organisations to let members know about what support is available. If organisations invite her along to their meetings, grants are available to help with costs of holding the meeting. DVD's, leaflets and posters giving information can be sent directly to groups.

Those eligible for help with the Switchover scheme include those over 75, those living in care homes for more than 6 months, those receiving disability living allowance, mobility supplement, or are blind/partially sighted.



Julie Akino

Contact Julie at digitaloutreach@ageukderbyandderbyshire.org.uk

10 Minute Slot - Dicky Tickers Heart Support Group

John Wardle (Chairman of Dicky Tickers Heart Support Group) and Joyce Cupitt both represent NDVA as partner governors at Chesterfield Royal Hospital. John gave an update on the fire at the hospital and complimented the staff on getting the hospital up and running so quickly.

John gave a short presentation on the Dicky Tickers group. He explained that cardiac rehabilitation follows on from heart problem diagnosis and treatment, either medication or open heart surgery, and a short hospital based rehab education and exercise programme. Heart patients are very strongly recommended to change their lifestyles and to increase exercise levels to build up heart muscle. Heart surgery is now a well-accepted procedure, perhaps it is getting commonplace, it is not however the final cure-all; rehabilitation and life style change is a vital follow on. Most patients have already gone through a high level of stress so to join in and lighten up with others with similar problems is a good way of starting recovery. Dicky Tickers also has a good social side which helps with bonding and contributes to well-being. They are a largely self-financing organisation following an initial start-up grant from Derbyshire County Council and great support from North East Derbyshire



John Wardle

District Council and its fitness instructors. Dicky Tickers together with other local clubs now go to the Royal Hospital and encourage and support patients. They also try to persuade them to join a club, take up exercise and stress that they must make changes.

Dicky Tickers exercise classes take place three times a week at Sharley Park, Clay Cross.

Contact: john@wardle1931.fsnet.co.uk

Clinical Commissioning: 'A Nuts and Bolts Approach'

The meeting was pleased to welcome **Dr Richard Bull, a Dronfield GP, whose presentation provided a very informative and useful update on Clinical Commissioning in Derbyshire (no longer referred to as Consortia).**

Dr Bull provided a definition of clinical commissioning:

- The strategic planning, procuring and monitoring & evaluation of health services for patients. (Ideally as a continuous cycle.)

He also outlined the Seven Pillars of GP Commissioning:

- Leadership
- Professional Standards
- Clinical Engagement
- Accountability
- Governance
- Public Participation
- Partnership Working

Dr Bull explained that the North Derbyshire Clinical Commissioning Group comprises 30 practices, representing 232,000 patients across North Derbyshire, from Bolsover to the Dales, from Dronfield to Clay Cross. He said that the Group is by design 'provider-centric' focusing on the Chesterfield Royal Hospital (CRH). As such the Group becomes the lead commissioner for services provided at CRH. The Group is also lead commissioner for Derbyshire Community Health Services.



Dr Richard Bull

There followed an extensive session of probing and wide ranging questions from the floor.

In response to a particular question about how voluntary organisations could strategically work with the GP Groups, Dr Bull said that it would be foolish not to involve the voluntary sector: GPs want to listen and engage.

A Forum member suggested that it would be good practice to have reports from GPs come through NDVA. GPs could come once a quarter to the Forum so members could raise any concerns. Dr Bull felt this was an excellent idea. He also pointed out that the GP Commissioning Groups are at very embryonic stages at the moment.

A copy of Dr Bull's presentation is available from NDVA.

Email info@ndva.org.uk or telephone 01246 555908

How did we do?

Those present at the Forum were asked to complete an Event Feedback form. Initial indications are that most participants rated it highly or very highly.

Voluntary Sector Health & Social Care Networking Event 2011

Several exhibitors said that this was NDVA's best Networking Event to date. One even described it as the best -and friendliest- Event of its kind that he had ever attended!

There were several unique features this year,, including the community launch of the Bowel Cancer Awareness Campaign. In addition, NDVA had its new promotional banners on display for the first time; we had support from our new volunteer (thank you, Richard) and we deployed 'Eric' our new tea urn, replacing last year's array of boiling kettles (Eric and urn ... get it!!)



Networking Event



Make a note in your diary

- NDVA Small Grant Application Closing Dates 16th September and 30th December 2011
- Next Health and Social Care Voluntary Sector Forum (Bakewell) 12th October 2011
- Copy deadline for next issue of 'Network' 14th October 2011

Cultural Diversity

The Asian Association of Chesterfield is offering a range of cultural diversity programmes.

For further information contact Sushri Wells, Secretary

Telephone: 07876 617050

Email:
asianassociation@btconnect.com



Welcome, Richard

NDVA is pleased to welcome 'on board' Richard Milner, a volunteer who is helping develop our IT capability and skills. Thanks to Richard, some of us here at NDVA even know how to switch on and shut down our PCs now! Some of you may have met Richard at our Networking Event, where he joined in helping exhibitors put up and take down their stands.

Healthy Lives, Healthy People: update and way forward

The Government has issued a policy statement reaffirming its vision for a new public health system. It sets out the progress made in developing the Government's vision for public health, and a timeline for completing the operational design of this work through a series of Public Health System Reform Updates.

To see the full document go to: http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_128333.pdf

HNC Help - Appeal

NDVA's AGM was told that HNC Help (Head and Neck Cancer Support for the North Midlands) is looking for more members and additional help for their self help group that meet at Chesterfield Royal Hospital.

Email: hnchelp@live.co.uk
Telephone or text: 07598 858991

Regional BME Network

NDVA has become a member of this Network which is organised by One East Midlands. Membership provides access to up to date news on regional BME issues affecting the Voluntary and Community Sector (VCS), enhanced ability to contribute to and influence regional and national policy re BME communities, together with access to support, advice and guidance on a range of issues affecting the VCS.

Sorry, Amy My apologies to Amy King, LINK Community Involvement Worker, whom I referred to as Amy White in the last issue of Network. Another senior moment! - *David Timcke*

Commissioning Mental Health Services

There is news about commissioning of mental health services after the demise of the Primary Care Trust (PCT) in March 2013.

Roger Kerry attended one of the Health Panel meetings organised by the PPI (Patient and Public Involvement) team at The Arkwright Centre on July 12th, where the PPI Manager, Pam Perdue, had some interesting information about commissioning structures post March 2013.

There will be five CCGs (Clinical Commissioning Groups) in Derbyshire. These are what were known as GP Consortia. The name change reflects one of the results of the Government's "listening exercise" whereby commissioning will involve other clinical professionals as well as GPs. The five are:

- Southern Derbyshire CCG (inc. Derby, South Derbyshire and the South Dales)
- Erewash CCG
- North Derbyshire (inc. Chesterfield, most of North Derbyshire District and the North Dales)
- Hardwick Health (inc Bolsover district and parts of North Derbyshire District)
- High Peak

The sharp-eyed will notice that the Southern Derbyshire CCG is quite similar in coverage to the old South Derbyshire Health Authority. The High Peak CCG is one of the smallest, in population terms, in the country with 65,000. Roger asked whether this would prove to be viable financially and the reply was 'maybe not'- and a merger with another CCG might be necessary. In fact it is a possibility that further mergers may happen in the north of the County which could lead

to something resembling the old North Derbyshire Health Authority, but this is speculation.

What is not speculation is that Hardwick Health will be the lead commissioning organisation for mental health in the whole of the County and City. This was confirmed by their Chief Operating Officer Wendy Sunney. It was also said that the CCGs would be making use of the commissioning knowledge of the PCT staff remaining in 2013. It is not clear exactly how these would be employed. There will be Clinical Networks to support CCGs with multi-disciplinary membership for specific areas of care. Mental health could be one of them.

Roger believes that this is the closest thing to good news for the mental health voluntary sector that we have had for some time. It will be much easier for us to get our message across to one commissioning organisation than to have to deal with several different consortia. If Hardwick Health is going to use the ex-PCT commissioners in some way we already have good relationships established. Possibly the Clinical Network will be similar to the old Strategic Partnership Group and we can maintain our influence over planning and strategy.

We will see what the future holds for our organisations and more importantly all our service users. Roger will be working on establishing a relationship with Hardwick Health. While we all know there will be tough competition to provide services, hopefully we will have more chance of winning contracts and promoting the social model of mental health than we would have dealing with multiple commissioning organisations.

Joint Forum

NDVA's Voluntary Sector Mental Health Network in partnership with Southern Derbyshire Voluntary Sector Mental Health Forum will be holding a joint meeting on the 27th September at Coney Green Business Centre, Clay Cross.

We will be serving our usual excellent lunch provided by 'Occasions' Speakers will be Dave Gardner from the current PCT Mental Health Commissioning Team, and a representative from Derbyshire County Council Roger has also asked Wendy Sunney from Hardwick Health to talk about their plans for mental health commissioning. Other agenda items will be confirmed nearer the time.



Roger Kerry

Relate increases service provision to support individuals and couples

Relate Derby and Southern Derbyshire have just increased their service provision in order that they can support even more individuals, couples and families who are experiencing relationship problems.

Appointments for Relate Derby and Southern Derbyshire can be made by calling 01332 349177. Lines are open Monday to Thursday - 9.30am to 8pm, Friday and Saturday - 9.30am to 12.30pm.

Southern Derbyshire CCG

Chair - Dr Sheila Newport
Ivy Grove Surgery
Church Farm Primary Care Centre
Steeple Drive
Ripley
DE5 3TH

Chief Operating Officer - Andy Layzell
Andy.layzell@derbyshirecountypct.nhs.uk
01773 525117

Assistant Operating Officers:

Jenny Swatton
Peter Moore
Kate Brown
Helen Dillistone

North Derbyshire CCG

Chair - Dr Ben Milton
The Darley Dale Medical Centre
Two Dales
Darley Dale
Derbyshire
DE4 2SA

Chief Operating Officer - Jackie Pendleton
Jackie.pendleton@derbyshirecountypct.nhs.uk
01773 525116

Assistant Operating Officers:

Sharon Gibbs
Jonathan Wardle
Loretta Boswell

Erewash CCG

Chair - Dr Paul Weston-Smith
Littlewick Medical Centre
42 Nottingham Road
Ilkeston
Derbyshire
DE7 5PR

Chief Operating Officer - Rakesh Marwaha
Rakesh.marwaha@derbycitypct.nhs.uk
01332 868668

Assistant Operating Officer:

Janet Baker

High Peak CCG

Chair - Dr Sean King
Elmwood Medical Centre
7 Burlington Rd
Buxton
Derbyshire
SK17 9AY

Chief Operating Officer - Sally Adams
Sally.adams@derbycitypct.nhs.uk
01332 888288

Assistant Operating Officers:

Sue Sims
Mike Murray
Steph Cook

Hardwick Health

Chair - Dr Steven Lloyd
Emmett Carr Surgery
Abbey Place
Renishaw
S21 3TY

Chief Operating Officer - Wendy Sunney
Wendy.sunney@nhs.net
07710 362543

Assistant Operating Officers:

Laura Smith
Clive Newman

Coal Industry Social Welfare Organisation – CISWO

Grants are available to people who have a connection with the mining industry; this could be retired mineworkers, widows or children of mineworkers (including those who worked in NCB canteens, offices etc).

CISWO cover the whole County and are able to give grants of £500 and up to £350 for electrical goods. They may also assist with stair lifts. Note there is a means test.

Examples of funding include:

- Decorating expenses
- Gardening
- £500 grant on a yearly basis to children of mineworkers attending university
- Holidays
- Assistance with funeral expenses
- Electrical goods up to £350
- Technical aids and equipment
- Wheelchairs and scooters

CISWO are willing to consider any reasonable requests to those where there is a connection with the mining industry.

Those referring need only to supply name, address and telephone number (obviously with consent) and then someone will contact the individual concerned in order to make a home visit.

Referrals may be by phone on 01623 625767 between 9.30-2.30pm or by fax 01623 626789 (there is no local website available).

The postal address is:

CISWO, Welfare Offices, Berry Hill Lane, Mansfield, Notts. NG18 4JR

NDVA Small Grants and 'TEUIF' Funding: supporting local groups

NDVA manages a small grants scheme which offers financial support towards the running costs of health and social care related voluntary groups in Derbyshire, with priority given to those having limited financial resources. Funding is provided by NHS Derbyshire County (PCT) and Derbyshire County Council.

We also manage the 'Travel Expenses & User Involvement Fund' (TEUIF), which is designed to cover out of pocket expenses of service users, carers and voluntary group representatives who participate in a variety of planning groups and consultation exercises relating to health issues in Derbyshire.

Further information about these grants can be seen on our website www.ndva.org.uk - or contact us on 01246 555908

Deadlines for submitting small grant applications:

- 16th September 2011
- 30th December 2011

Community Action Grants

Derbyshire County Council (DCC) is offering Community Action Grants of up to £1,000 to help small groups run projects that improve life in their local community.

Who can apply?

- Charities
- Community and voluntary groups
- Sports clubs
- Social enterprises.

Groups must be formally constituted, with a bank account (requiring at least two independent signatories) as well as a governing document / list of governing members and a set of rules.

DCC would like to fund a wide range of different projects from many different types of organisations. Below are a few suggestions of the types of projects they will fund. It is by no means a full list.

- Play or sports equipment
- An event for teenagers
- Setting up a community litter picking group
- A local food fair or festival
- An arts or local history project
- A sporting event
- Transport or training
- Setting up a club for carers
- Promoting a community website

What can a grant pay for?

- Buying and hiring equipment
- Hiring a venue
- Travel (such as getting people to an event)
- Training fees
- Materials for your project
- Publicity costs for your project.

However, a Community Action Grant cannot pay for:

- Promoting religious or political beliefs
- Buying land or buildings
- Running costs e.g. utility bills, council tax, rent and insurance
- Ongoing staff costs e.g. wages and personal expenses.

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Community Action Grants, continued

You can apply anytime until 14 December 2012. A panel will consider applications approximately every three months. The remaining deadlines for each panel are 28th October in 2011 and 27th January, 27th April, 27th July, 26th October and 14th December in 2012.

How to apply
To request a printed copy of the application form, telephone 'Call Derbyshire' on 08 456 058 058.

Funding of Care and Support - Commission report published

The Commission on Funding of Care and Support has presented its findings to the Government in its report 'Fairer Care Funding', published on 4th July 2011.

The independent commission, set up by the Government last July, was asked to recommend a fair and sustainable funding system for adult social care in England.

Among the recommendations in the report are:

- Individuals' lifetime contributions towards their social care costs – which are currently potentially unlimited – should be capped. After the cap is reached, individuals would be eligible for full state support. This cap should be between £25,000 and £50,000. We consider that £35,000 is the most appropriate and fair figure;
- The means-tested threshold, above which people are liable for their full care costs, should be increased from £23,250 to £100,000;

- National eligibility criteria and portable assessments should be introduced to ensure greater consistency; and
- All those who enter adulthood with a care and support need should be eligible for free state support immediately rather than being subjected to a means test.

The Commission estimates that its proposals – based on a cap of £35,000 – would cost the State around £1.7 billion.

Andrew Dilnot, Chair of the Commission, said:

"The issue of funding for adult social care has been ignored for too long. We should be celebrating the fact we are living longer and that younger people with disabilities are leading more independent lives than ever before. But instead we talk about the 'burden of ageing' and individuals are living in fear, worrying about meeting their care costs.

The current system is confusing, unfair and unsustainable. People can't protect themselves against the risk of very high care costs and risk losing all their assets, including their house. This problem will only get worse if left as it is, with the most vulnerable in our society being the ones to suffer.

Under our proposed system everybody who gets free support from the state now will continue to do so and everybody else would be better off. Putting a limit on the maximum lifetime costs people may face will allow them to plan ahead for how they wish to meet these costs. By protecting a larger amount of people's assets they need no longer fear losing everything."

The recommendations are given in full in the Commission's report Fairer Care Funding. The report is also available in an easy read version and pamphlet which gives a summary of the main recommendations.

The full report can be viewed at: www.dilnotcommission.dh.gov.uk/ -

In a report to the Derbyshire County Council (DCC) Cabinet on 12th July, David Lowe, Strategic Director – Policy and Community Safety, updated DCC Members on the latest developments in relation to the Health and Social Care Bill, particularly in relation to Public Health and the establishment of the Health and Wellbeing Board.

Members were reminded that the Health and Social Care Bill had been subject to an eight week NHS Listening Exercise to improve the modernisation plans. The NHS Future Forum had been established as an independent advisory panel to drive engagement, listen to people's concerns and offer advice to the Government on how the proposals for the NHS might be improved.

The Government has indicated that it will implement the Forum's core recommendations. Some will require significant amendment to the Bill and the Government is to 'recommit' the relevant parts to a Public Bill Committee for scrutiny. The Future Forum will continue to lead listening on the NHS, focusing on education and training, patients' rights and public health.

The report goes on to state that the key points in the Government's response which have particular relevance to Derbyshire County Council are:

- GP Consortia will now be known as "Clinical Commissioning Groups" to reflect wider clinical involvement. Commissioning groups will all be established by April 2013. Some will be authorised and operational and some will operate in shadow form with the local arms of the NHS Commissioning Board, commissioning on their behalf, until they are ready to take over responsibility.
- Clinical Commissioning Groups will have a duty to promote integrated health and

social care around the needs of users. The Government has accepted the recommendation of the Future Forum that their boundaries should not normally cross those of local authorities, with any departure needing to be clearly justified. There will be a requirement to seek the views of Health and Wellbeing Boards who can object.

- Health and Wellbeing Boards will be given a stronger role in leading on local public involvement. Whilst the Health and Social Care Bill currently gives Boards responsibility for identifying local need and developing a joint Health and Wellbeing Strategy to meet those needs, it does not require Boards to involve the public in these two processes. The Bill will now give and Health and Wellbeing Boards a new duty to involve users and the public.
- There will be a stronger expectation for NHS Commissioning Plans to follow local Health and Wellbeing Strategies, as well as the Joint Strategic Needs Assessment (JSNA). The Bill will be strengthened to make clear that Health and Wellbeing Boards should be involved throughout the process as Clinical Commissioning Groups develop their commissioning plans.
- Health and Wellbeing Boards will now have a stronger role in promoting joint commissioning and integrated provision between health and social care. The Boards will discharge executive functions of local authorities and will be subject to the existing statutory arrangements for overview and scrutiny.
- Local authorities will still be able to challenge any proposals for the substantial reconfiguration of services and the Government will retain the four tests for assessing service reconfigurations.
- Clinical Commissioning Groups will have governing bodies involving at least two lay members and at least one specialist nurse and one specialist doctor.

- Commissioners will be supported by clinical networks (advising on single areas of care, such as cancer) and new "clinical senates" in each area of the country (providing multi-professional advice on local commissioning plans) – both hosted by the NHS Commissioning Board.
- Primary Care Trusts will be abolished by April 2013 and primary care cluster arrangements for the NHS Commissioning Board will be in place by that time to provide local arrangements for the NHS Commissioning Board. 3 Strategic Health Authorities will remain in place until 2013 but will be formed into a smaller number of clusters for management purposes as has happened with Primary Care Trusts.

The changes outlined will strengthen the role of Health and Wellbeing Boards. In addition the Government's response to the NHS Future Forum is very positive about their potential and about the move of public health responsibilities to upper tier local authorities. HealthWatch, which will take over the current role of the Local Involvement Network (LINK), will have statutory representation on Health and Wellbeing Boards. *(Note, however, there is no statutory place for Voluntary and Community Sector representation – NDVA, as a 3D member, previously represented the VCS at Health and Wellbeing Partnership meetings, now concluded. See final paragraph below.)*

Public health responsibilities will formally transfer to the County Council by April 2013. The County Council has welcomed the opportunity provided by the changes to lead and work with the full range of partners to drive forward local health improvement and to address health inequalities.

As stated, the Health and Social Care Bill requires the County Council to establish a statutory Health and Wellbeing Board which is to be treated "as a committee appointed under section 102 of the Local Government Act 1972". The Board will be required to:

- Develop a Joint Health and Wellbeing Strategy involving users and the public, based on a Joint Strategic Needs Assessment
- Support joint commissioning of NHS, social care and public health services
- Ensure close working relationships between partners.
- Provide a strategic framework for the detailed commissioning plans for the NHS, social care, public health and other services to best meet health and wellbeing needs.
- Ensure that services and commissioners are maximising their effectiveness on health improvement and reducing inequalities.

The Council has accepted an invitation from the Government to be an "early implementer" for Health and Wellbeing Boards. The "shadow" Board (which met for the first time on 7 July 2011), will act as an advisory body to the County Council's Cabinet, NHS Derbyshire Board and the Clinical Commissioning Groups. The full Board will be in place from April 2013 and will then become a committee of the County Council. The composition of the "shadow" Derbyshire Board broadly follows the statutory model, with the addition of places for district council members.

Initial consultation with stakeholders at a Derbyshire Partnership Forum priority setting and governance workshop took place at the end of April 2011 with many organisations expressing their desire to engage with the Board. Supporting structures will be developed to ensure engagement and influence from a wider range of organisations, including all district and borough councils, providers (including hospitals), the voluntary and community sector and other stakeholders. Early discussions have already taken place with 3D, the county network of voluntary and community sector infrastructure organisations, to discuss engagement arrangements.

The full report can be viewed via the Derbyshire County Council website.

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**NETWORK is available in large print on request.
It is also available on the NDVA website.**

The next distribution date for 'Network' newsletter is 14 November 2011.
If you would like an article included, please ring or e-mail NDVA to discuss
and send copy to us by 14 October 2011.

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NDVA Directors

as from 6th July 2011

Sue Howard
Teddi Carlson
Roland Brown
Heather Fawbert
Jackie King-Owen
Ann Sullivan
John Wardle
Dawn Longden-Whiting
Lynn Tory

NDVA Staff

David Timcke, Chief Officer
Sue Thickett, Administrative Assistant
Jacqui Willis, Liaison Officer
Roger Kerry, Mental Health Liaison Worker
Bryony White, Mental Health Administrative Assistant
Sharon Buels, Derbyshire LINK Administrative Support