

## **Minutes of the Health and Wellbeing Board Meeting held on 6 September 2018**

### **Attendance:**

Alan White (Co-Chair (In the Chair))	Staffordshire County Council
Simon, Fogell	Healthwatch
Tim Clegg	District & Borough Council CEO Representative
Frank Finlay	District Borough Council Representative (North)
Roger Lees	District Borough Council Representative (South)
Glynn Luznyj	Staffordshire Fire and Rescue Service
Dr Richard Harling	Staffordshire County Council
Philip White	Staffordshire County Council
Helen Riley	Staffordshire County Council
Shammy, Noor	South East Staffordshire and Seisdon Peninsula CCG
Tracy, Parker-Priest	STP
ACC Jenny Sims	Staffordshire Police

**Also in attendance:** Jon Topham, Senior Commissioning manager, Public Health; Karen Bryson, Assistant Director, Public Health; David Sugden, Commissioning Manager, Strategy and Policy; Janene Cox, SCC Commissioner for Culture & Communities; Mick Harrison, SCC Commissioner for Safety, Children & Families; Vicky Rowley, SCC Commissioning Manager, Older people; Rebecca Wilkinson, BCF Strategic Lead; Kerry Dove, Interim Strategic Insight Manager; and Emma Sandbach, Interim Consultant, Public Health.

**Apologies:** Dr Alison Bradley (North Staffs CCG), Mark Sutton (Staffordshire County Council (Cabinet Member for Children and Young People)), Dr Paddy Hannigan (Chair, Stafford and Surrounds CCG) and Simon Whitehouse (Staffordshire Sustainability and Transformation PI)

### **14. Introduction by the Chair**

The Chairman welcomed new members to the Board. He also highlighted the format change to the way the agenda is set out, giving a focus on prevention and making it more relevant to the H&WB Strategy.

## 15. Declarations of Interest

There were none at this meeting.

a) Minutes of the H&WB meeting held on 7 June 2018

**RESOLVED:** That the minutes of the Health and Wellbeing Board held on 7 June 2018 be confirmed and signed by the Chairman.

## 16. Questions from the public

Question 1

The following statement and questions had been submitted by Viran Patel:

*JSNA does not provide the full waiting list for primary care and secondary care services for assessment and diagnosis. Given that it is up to the statutory authority to deal with making sure that public sector equality is upheld will they do the following:*

*Questions 1) Will the chair including all associated bodies that commission local services, now ask or provide waiting lists for each contract in place for assessment and diagnosis, in the NHS and provide the total cost of clearing each waiting list?*

*Question 2) Will the chair request that the waiting list for all Social Care services are published on a monthly basis where people are waiting for a review emergency or otherwise, and the first assessment and provide a cost for each month to clear that waiting list?*

*Question 3) Will the board then provide the list to the Secretary of State for Health and Social Care, to make sure they are aware of the waiting list and hold them to account on funding the clearing of such waiting list under the health and social care act and the care act?*

The Chairman read out the question (printed on the agenda) to the Board. The Questioner was not present at the meeting.

Members noted that this Board did not manage waiting lists for either social care or the NHS, although they could ask the CCGs and the County Council to provide appropriate information. However, they saw no value in writing to the Secretary of State for Health, as proposed in question 3, as local waiting lists were not his responsibility. Members also noted this question would be difficult to answer as different waiting lists were held for each contract and there were different targets for each provider, with penalties where these target were not reached. Members agreed that a response should be submitted within 30 days.

Question 2

The Chairman read a question (not printed on the agenda) from Darren Bullock of Painsley Catholic College, which informed the Board that the College was currently undertaking an audit of their wellbeing and were working towards the Wellbeing Award for Schools. As one of their actions towards this they were hoping to form a link with this Board. Philip White, SCC Cabinet Member for Learning and Employability, would lead on this link on the Board's behalf.

## 17. Health and Wellbeing Board Terms of Reference

At the 7 June Board meeting the updated Health and Wellbeing Strategy had been endorsed and a review of the terms of reference had been agreed along with a job description for Board Members. Members now received the amended terms of reference and considered the changes to membership and role description.

The terms of reference included:

- sub groups around: Prevention Programme Management; BCF and Joint Commissioning; Families Strategic Partnership; and Physical Activity; and,
- a new relationship proposed with the STP and with the Stoke H&WB, considering a “Committee in Common” approach.

Members were comfortable with the proposed new subgroups. They queried the current status of the drug and alcohol working group previously established by this Board, feeling this was particularly important with current concerns around the use of monkey dust and spice. There was a collaborative approach to this work, which was run as a sub-group of the Family Strategic Partnership.

Members agreed:

- the job description appended to the report;
- the inclusion of 2 voluntary sector representatives to the membership of the Board; and,
- the importance of close relationships with the STP whilst being mindful to avoid duplication. This could be addressed by having a standing STP item on each H&WB agenda.

The merits of a joint H&WB across the whole of Staffordshire and Stoke-on-Trent were discussed. Board Members were in favour of a joint Stoke-on-Trent and Staffordshire H&WB, however whilst officers at Stoke-on-Trent City Council appeared to be sympathetic towards this, there was currently some opposition to the idea from their Councillors. A number of opportunities for raising this issue were highlighted by Board Members, including through:

- Police partnership resources by ACC Jenny Sims;
- work around the Safeguarding Board early implementer initiatives;
- STP joint working; and
- Preventing Teams and a possible single bid across Staffordshire and Stoke-on-Trent.

**RESOLVED:** That the amended terms of reference and Members job description be agreed.

## **18. Place Based Approach - Update on Progress**

The Board received details of progress with the Place Based Approach (PBA) and activities in localities. A consolidation of the Public Health’s Prevention Through Wellness (PTW) programme and the PBA had taken place to enable a coordinated approach that supported and promoted local community wellbeing.

Members received details of current activity and evidence of outcomes from the eight district/borough pilot projects. In particular the achievements from the Tamworth pilot

were shared, including: the Tamworth Children's Pilot; Tamworth Vulnerability Partnership; Early help/earliest help showcase event; and the County Councils pilot of a one front door approach to Children's Services. The work in Tamworth had begun to show a reduction in demand on the Local Support Teams (LSTs) of between 10-11%.

The Board received details of the Early Help Performance Framework which would be used to benchmark on levels of demand in specific areas, with funding allocated against this. The Framework would be monitored over a six month period to evidence outcomes from investment.

Examples of partnership working and shared learning opportunities were discussed. Schools were a key part of the early help work with some Dedicated Schools Grant (DSG) money being used towards prevention work. The impact these initiatives had on low level crime and domestic violence was also considered as well as the impact on service demand for children and adult social care services, health and Police. A reduction in crime had been seen in both Tamworth and Newcastle.

The Board supported this work and were keen to see how the benefits evidenced in Tamworth and Newcastle would inform work around the County and looked forward to future reports outlining this.

**RESOLVED:** That:

- a) the report be noted; and
- b) the aspiration of a seamless partnership offer within a locality be endorsed.

## **19. Prevention Through Wellness, Operational Programme and Governance**

At its 7 June 2018 meeting the Board had updated the Health and Wellbeing Strategy, setting out the County's ambition to increase healthy life expectancy from birth to end of life and had approved the Prevention through Wellness Framework as its delivery vehicle. Members now received more details of the programme, including the following four transformation projects:

- Preventative Pathways – simplifying and connecting services and promoting a culture of personal ownership of wellbeing, self-management and independence;
- Supportive Communities – building the capacity, systems and processes that help people to live independently and manage their care needs with support from families and communities in the first instance;
- Digital and Voice – connecting people with their data which provides an insight to their health and wellbeing to support them living healthier lifestyles;
- Healthy Environments – improving where and how we live, supporting people to improve their own environment and reduce risks to their wellbeing.

Implementation of the Programme would require sustained and co-ordinated effort across a range of public sector partners and professionals as well as contributions from the private sector and local residents. The Board's role would be to provide leadership for further development and implementation and to provide assurance on its implementation.

The current healthy life expectancy in Staffordshire was 64 years and there was an ambition to extend this by at least six months. The importance of appropriate sign

posting was emphasised and the link with social prescribing. Work was being undertaken with a range of partners, including libraries, to help with signposting and to work towards more active communities.

There were some good examples of social prescribing and it was intended that the STP would map these, looking at the different approaches with local populations. Services would need to change to make sure this work was embedded with the Health in All Policies (HiAP). There was also a developmental role to ensure that community resolutions were considered rather than an automatic services first response.

**RESOLVED:** That:

- a) the Prevention through Wellness Operational Programme and governance arrangements be approved;
- b) leadership for its further development and implementation be provided by the Board;
- c) a new conversation with professionals and the public be supported, to promote greater personal ownership of wellbeing, self-management and independence; and
- d) regular progress reports be considered to enable assurance of implementation.

**20. End of Life: Conversation with the Public - Final Report**

Members received an evaluation of the success of the H&WB public engagement campaign “Staffordshire Dying Matters”, which ran from mid-March to mid-May 2018. The campaign encouraged the public to talk about death and dying, to enable better quality of life and to better plan for their end of life. Members received details of outputs from the campaign, which exceeded expectations against the targets set.

Originally the public debate/campaign had been intended to raise the public profile of the Board. The campaign had been low cost but resource intensive.

The Board was informed that the End of Life work stream was working with providers and the voluntary sector to help embed the learning from this campaign. Training was needed to ensure that all involved (GPs, paramedics, NHS Staff, care staff) followed end of life care plans.

**RESOLVED:** That:

- a) the approach and outcomes of the Dying Matters Staffordshire public conversation be noted;
- b) a progress report be brought to the Board in 6 to 12 months.

**21. Mental Wellbeing & Suicide Prevention**

Members received the Suicide Prevention Action Plan for Staffordshire and Stoke-on-Trent. They also received details of work to consider the issue of parental mental ill health and the impact this can have on children’s health and wellbeing. It was intended that this work would help to highlight the issues, gaps and areas of good practice, with results reported to the Board as well as the Children’s and Adult’s Safeguarding Boards. Members also received details of a specific project in Hednesford, Cannock, in developing a “Time to Change Hub” that will help reduce the stigma of mental ill health.

**RESOLVED:** That:

- a) the Suicide Prevention Action Plan be agreed and supported;
- b) the research being undertaken around parental mental ill health be supported; and
- c) the development of the “Time for Change Hub” in Hednesford, Cannock, be supported.

**22. Healthwatch Staffordshire**

Healthwatch Staffordshire published their Annual Report 2017/18 on 30 June 2018. Members now considered this report, which set out the work undertaken by Healthwatch in their role as the independent champion for health and social care in Staffordshire. Members also received a presentation on the work of Healthwatch and their wider role.

**RESOLVED:** That:

- a) the report be noted; and
- b) the Board continue to work with Healthwatch to create stronger working links.

**23. Staffordshire Health and Wellbeing Board Strategy Consultation 2018**

The Board considered the feedback from the strategy refresh questionnaire. 1231 people from a broad geographical cross section of Staffordshire had responded and the feedback had been largely positive.

**RESOLVED :** That:

- a) the report be endorsed for reference in the development of its strategy and delivery plan; and
- b) use of the report to inform future conversations with the public to promote the health and wellbeing agenda be noted.

**24. Staffordshire Better Care Fund 2018 Quarter 1 Progress Report**

Staffordshire Better Care Fund (BCF) Quarter 1 performance and activity summary data was shared with Members, alongside joint commissioning intentions for the County Council and CCGs as part of the BCF Joint Commissioning Board.

Delayed Transfers of Care (DTOC) were being reduced, with figures for May 2018 showing a total of 15.46 (delayed days per 100,000 people over the age of 18) against a target of 16.02. This was towards a trajectory of 10.00 by September 2018. However Staffordshire’s high level of DTOC had been highlighted as an issue for national escalation as part of the 2017-19 BCF Plan resulting in support for the system through Peer challenges and external reviews. This had identified some structural and data factors that contributed to the consistently high level of DTOC in Staffordshire, resulting in agreements with the BCF National Team to provide support and challenge to reduce the DTOC.

The H&WB had previously delegated authority to the Co-Chairs to sign off the BCF on their behalf, to take account of the fast pace at which decisions were often needed and the difficulties in being able to arrange very short notice and frequent H&WB meetings to

deal with urgent decisions. The Board agreed that authority for sign off should remain with the Co-Chairs.

The Board were also advised that the CQC had asked to review the system in October 2018 and that they may wish to speak to some Board Members as part of that review.

**RESOLVED:** That:

- a) the Quarter 1 performance be noted;
- b) the issues uncovered regarding DTOC methodology and agreed approach to DTOC counting be noted; and
- c) H&WB Co-Chairs have delegated authority to sign off BCF on the Board's behalf.

## **25. JSNA Review - Update**

At their meeting of 7 June the Board had agreed a review of the JSNA work programme. It was now proposed that an annual full JSNA report monitoring population outcomes would be produced rather than the current quarterly reports. However the Board would still receive any exception reporting on a quarterly basis and there would also be an opportunity to receive detailed themed JSNA reports, with the initial themes being: housing and health; and communities and their contribution to improving health and wellbeing outcomes.

Where a topic for a detailed themed report was identified Members were asked to nominate individuals from their respective organisations as appropriate to contribute towards this work.

**RESOLVED:** That:

- a) the revised core JSNA work programme be approved;
- b) Board Members agree to nominate colleagues from their respective organisations as appropriate to contribute to the themed reports; and,
- c) topics for the initial themed reports be: housing and health; and, how communities can contribute to improving health and wellbeing.

## **26. Seasonal Flu Plan and Campaign**

The 2018-19 Seasonal Flu Plan set out various actions required, including how to improve the uptake of flu vaccinations in frontline staff and how to develop local promotional campaigns to encourage uptake in "at risk" groups. As the uptake in Staffordshire had been lower than the national average last year for both frontline staff and at risk groups it was important that the Board actively supported the seasonal flu campaign and promote it across their own organisations.

Board Members supported this campaign and agreed to promote it within their respective organisations.

**RESOLVED:** That:

- a) Board Members act as local leaders in supporting the local flu campaign, taking part in local media campaigns and by having the flu vaccination;
- b) the Board act as advocates for vaccination of their staff where eligible and emphasis the importance of this on overall system resilience.

**27. Forward Plan**

Board Members were asked to forward any comments on the Forward Plan to Jon Topham, Senior Commissioning Officer, Public Health.

**RESOLVED:** That comments on the Forward Plan be forwarded to Jon Topham.

**Chairman**