

# Minutes of the Meeting of the Warwickshire Health and Wellbeing Board held on 1 May 2019

## **Present:-**

### Warwickshire County Councillors

Councillors Les Caborn (Chair), John Holland and Izzi Seccombe OBE

### Warwickshire County Council (WCC) Officers

Nigel Minns (Strategic Director for People Directorate, WCC)

### Clinical Commissioning Groups (CCGs)

Dr. Sarah Raistrick (Vice Chair, Coventry and Rugby CCG)

Dr. David Spraggett (South Warwickshire CCG)

### Healthwatch Warwickshire

Elizabeth Hancock (Chair)

### Borough/District Councillors

Councillor John Beaumont (Nuneaton and Bedworth Borough Council (NBBC))

### Other Attendees

Angie Arnold (Shakespeare Hospice), Ruby Dillon (Public Health Officer, WCC), Gillian Entwistle (South Warwickshire CCG), Monica Fogarty (Chief Executive, WCC), Jane Grant (NBBC), Andrea Green (Warwickshire North and Coventry & Rugby CCG), Becky Hale (Assistant Director, Strategic Commissioning, WCC), Trevor Illsley, Jackie Kerby (Public Health, WCC), David Lawrence (Press), Harrison Marsh (Alzheimer's Society), Spencer Payne (Service Manager, Business Intelligence, WCC), Faris Al Ramadani, Rob Sabin (Public Health, WCC), Deb Saunders (Public Health, WCC), Hayley Sparks (Public Health, WCC), Emily Van de Venter (Associate Director of Public Health, CCG and WCC).

## **1. General**

### **(1) Apologies for Absence**

#### Board Members

Councillor Jeff Morgan (WCC), Helen King, (WCC Assistant Interim Director of Public Health), Russell Hardy (Chair, George Eliot Hospital NHS Trust (GEH) & South Warwickshire NHS Foundation Trust (SWFT)), Jagtar Singh (Coventry & Warwickshire Partnership Trust),

#### Other Apologies

Sir Chris Ham (Chair, Better Health, Better Care, Better Value (BHBCBV)) and Noel Hunter (Myton Hospice).

### **(2) Members' Declarations of Pecuniary and Non-Pecuniary Interests**

None.

### **(3) Minutes of the Board Meeting held on 9 January 2019**

The Minutes were agreed as a true record.

#### **(4) Chair's Announcements**

There had been a number of changes to the Board's membership and the Chair thanked the following people for their service:

Deryth Stevens, Chair of NHS Warwickshire North CCG

Prem Singh, GEH

Rachael Danter, NHS England, who was now System Transformation Director for BHBCBV

Councillor Jacqui Harris, Stratford District Council

He welcomed new Board members:

Councillor John Beaumont, NBBC

Elizabeth Hancock, Chair of Healthwatch Warwickshire

The Chair announced that Helen King had been appointed as Interim Director of Public Health and noted that Russell Hardy was now Chair of both GEH and SWFT.

The Board had agreed in January that the final approval of the Better Care Fund submission would be delegated to a meeting of the Sub-Committee between formal Board meetings. The receipt of the final guidance was still awaited and it was anticipated that the Sub-Committee would need to be convened around week commencing 10th June.

## **2. Health and Wellbeing Board Annual Review 2018/19 and Delivery Plan 2019/20**

The Board considered its Annual Review for 2018/19 and Delivery Plan for 2019/20. The Annual Review highlighted the continued achievements in health and wellbeing across the system, building on previous reports. The achievements had been sourced from across the Health and Wellbeing Board (HWB) partnership and reflected the breadth of effort in delivering the outcomes in the HWB Strategy.

The second part of the report looked forward, covering elements to support the delivery of the refreshed HWB Strategy and the focus of activity for 2019/20. The key elements were outlined:

- Prioritising prevention;
- Strengthening communities;
- Coordinating services; and
- Sharing responsibility.

Feedback was sought on the draft document, which would then be updated and submitted to the Board in September 2019 for final approval, alongside the annual performance report. It would also be submitted to the County Council for its endorsement and would then be published.

Nigel Minns, Strategic Director for WCC's People Directorate referred to the publication 'Public Health Transformation - Six Years On' and a link to this document would be circulated. He added that the current HWB Strategy was initially for the period to 2018 and had subsequently been extended to 2020. It was timely for a new strategy to be drafted and submitted for the Board's consideration, possibly to the meeting in September 2019. A request was made by Councillor Beaumont that better quality digital graphics be used in documents to assist

members in interpreting them. This point was noted.

## **Resolved**

That the Health and Wellbeing Board endorses the Annual Review 2018/19 and Delivery and Development Plan for 2019/20.

### **3. Better Health, Better Care, Better Value Programme Update**

An update was provided which covered the following areas:

- Integrated Care System Update
- Place-based Planning - 2019/20
- Priorities:
  - Maintain over-arching responsibility for driving system-wide achievement of all national deliverables
  - Significant transformational change - in 2019/20 the necessary foundations would be in place at three levels of System, Place and Network.
  - In response to the NHS long term plan, the opportunity throughout the spring and summer of 2019/20 for partnership work to refresh our system-wide Health and Well Being Strategy.
- Clinical Strategy – update on identified priorities
  - Frailty
  - Mental Health and Emotional Wellbeing
  - Musculoskeletal
- Transformational Programmes of Work
  - Proactive and Preventative
  - Maternity and Paediatrics
  - Mental Health and Emotional Wellbeing
  - Planned Care
  - Productivity and Efficiency
  - Urgent and Emergency Care
  - Demand and Capacity
- Enabling Programmes of Work
  - Estates and Digital Health

Liz Hancock reported that HWW was undertaking the local consultation work for the NHS ten-year plan. To date, some 490 responses had been received, one of the highest response rates in the country. Nigel Minns urged that use be made of the data from the place-based JSNA work and engagement with the local JSNA steering groups, to feed in emerging priorities. Liz Hancock spoke of the positive feedback on levels of engagement with the JSNA work, especially in Atherstone.

A comment was made by Councillor Beaumont on the differing numbers of primary care networks (PCNs) being proposed for each area of Warwickshire. Some were planning to have far more PCNs than others, meaning that there was a corresponding variance in the number of people that each PCN would serve. Sarah Raistrick clarified that for the Rugby area, there was a strong desire amongst GPs to work together and a single PCN was currently proposed to achieve economies of scale. However, it may be the case that this was sub-divided into three PCNs. The Chair offered to keep the Board updated on this matter.

## **Resolved**

That the Board notes the report and its contents.

### **4. Better Together Programme Progress Update**

The Board received an update from Becky Hale, WCC Assistant Director of Strategic Commissioning. The Better Together Programme plan for 2017-19 focussed activity to improve performance in four key areas that were measured against the national performance metrics shown below and commentary was provided on each of these areas.

- a. Reducing Delayed Transfers of Care (DToC)
- b. Reducing Non-Elective Admissions (General and Acute)
- c. Reducing admissions to residential and nursing care homes and
- d. Increasing effectiveness of reablement

In terms of the High Impact Change Model (HICM), progress continued to be made against implementing all eight changes in the model and the most recent self-assessment of progress was provided. An update was also provided on the Better Care Fund policy framework and guidance for 2019/20.

The Chair referred to the 'red bag' scheme, displaying a sample of the bag that was used when care home residents went into hospital. All of their medication, notes and required personal items were kept together securely, throughout the period of stay in hospital. This was being trialled with 22 care homes across Warwickshire. It was questioned if this scheme could be extended to patients who lived at home, but their conditions required frequent hospital stays. Several Board members were supportive of this suggestion, which the Chair agreed to look into. Positive publicity of the pilot scheme was encouraged.

## **Resolved**

That the Board notes:

- 1) The progress of the Better Together Programme in 2018-19 to improve performance against the four national Better Care Fund (BCF) areas of focus;
- 2) The progress against the High Impact Change Model; and
- 3) The update on the Better Care Fund Policy Framework and Guidance for 2019-20.

### **5. Children 0-14 Unintentional Injuries**

Deb Saunders of WCC Public Health introduced this item. In Warwickshire, hospital admissions following an injury amongst 0-4 year olds and 0-14 year olds were significantly higher than the national and regional averages and higher than the majority of Warwickshire's statistical neighbours. There had been a notable rise in these admissions since 2012/13 and data was provided on the types of injuries. A multi-agency Child Accident Prevention (CAP) Steering Group had been established with clear governance links to key bodies, to provide strategic leadership across the

county in tackling unintentional injuries in children. The strategic partnership had established three task and finish groups to undertake joint interrogation of local accident and emergency department data, to ensure consistent messages were delivered and to foster a collaborative approach to tackling local unintentional childhood injuries. The focus of each of the following groups and their progress to date was reported:

- Data and Insight Task & Finish Group
- Developing the Workforce Task & Finish Group
- Communications and Partnerships

The report also detailed the partnership work with the Child Accident Prevention Trust. In response to questions, it was confirmed that children's centres had been involved in this work and that good working relationships had been established with all hospital trusts, most recently with the Gorge Eliot Hospital. Councillor Beaumont advised that there were several informal groups providing services for those with younger children in the Nuneaton and Bedworth area and these groups should be engaged too. There was knowledge of these groups and the aim was to progress steadily and to seek information from a wide variety of sources. Discussion took place about older children self-harming, the efforts to make every contact count and where appropriate, to refer people to the child and adolescent mental health services. The current focus was to understand why Warwickshire was an outlier in terms of unintentional injuries and the findings from this work may be a catalyst for other areas. It was suggested that a briefing note on progress be provided in six months and a formal report to the Board in twelve months' time.

## **Resolved**

That the Board:

- 1) Notes the progress that the multi-agency Child Accident Prevention Steering Group is making towards understanding and tackling high rates of hospital admissions for childhood injuries in Warwickshire; and
- 2) Supports the three year Warwickshire Child Accident Prevention strategic action plan, as outlined in Appendix 1 to the report, and the 2019/20 Mar Comms Plan, as outlined in Appendix 2 to the report.

## **6. Joint Strategic Needs Assessment**

Emily van de Venter provided an update on the delivery of the place-based needs assessments as part of the Warwickshire Joint Strategic Needs Assessment (JSNA) programme.

The needs assessments for wave one of the programme had been completed and published on the website: <http://hwb.warwickshire.gov.uk/jsna-place-based-approach/>. Based on the analysis and key findings presented in these reports, steering groups in each area had developed action plans reflecting specific local health and wellbeing needs. Some common overarching themes had been identified, together with specific needs for each local area, as summarised in the report. Actions had already commenced to address local community needs.

Wave two was underway and steering groups had been established for each JSNA area to oversee the process. The following areas fell within wave two:

- Bedworth West
- Bedworth Central and Bulkington
- Bilton and Rugby Town Centre
- Hillmorton
- Cubbington and Lillington & Warwick District East
- Stratford-upon-Avon

Stakeholder events and engagement sessions had been planned across these communities. In order to support more effective programme governance, the project had been split into four integrated work streams; Insight, Engagement, Communications and Quality, and Action Plans.

The report concluded with next steps and an outline of the support being sought from Board members. A short demonstration was provided by Spencer Payne of the new web-based tool 'Warwickshire Insights' that enabled users to profile JSNA areas. It gave the ability to obtain detailed information for a local area, for example on deprivation. The tool could be used to produce reports and had a mapping function to give a visual overview. The link would be circulated to Board members. The tool was welcomed and examples were provided of how it was being used already. Board members were keen to see this level of information being available for all areas of the County. It was confirmed that the place-based JSNA work would be completed during this year. Other services could similarly add data to the tool. A question was submitted about NHS population health data. Andrea Green advised that some information was already available, but this would be a long-term project. In addition, there were governance restrictions on the sharing of health data.

## **Resolved**

That the Board

- 1) Notes the progress made to date in delivering Waves 1 and 2 of the JSNA place-based programme;
- 2) Notes the emerging priority themes identified in the needs assessments and uses this evidence base to drive commissioning intentions and decision making; and
- 3) Endorses and implements the suggested actions identified in section 4 of the report.

## **7. Feedback from the Place Forum on 6 March 2019**

The Warwickshire and Coventry Health and Wellbeing Boards met as the Place Forum on 6 March 2019. This was the fifth joint meeting, again with good attendance by over 40 people.

The report outlined the main aims of the session and the subjects that had been considered. It had been acknowledged that there was mature collaboration between the health and wellbeing boards and some key products were in place. This gave a real opportunity for the Place Forum to play a key role in the future and to review its

position in light of the NHS Long Term Plan and refresh of the Sustainability and Transformation Plan by the autumn of 2019.

The report confirmed the actions agreed as part of the Place Plan and the focus of partner activity up to the next meeting. It was currently planned for the next Place Forum to take place on 11th June and an outline was given of the topics for consideration at that time.

Nigel Minns referred to the Integrated Care System (ICS). He had spoken with Sir Chris Ham, Chair of BHBCBV the previous day and gave a verbal update. There was the intention to follow through with the assurances provided at the February special Council meeting in regard to the ICS. Reviews were currently underway and it was expected that further information would come to the next Place Forum.

Sarah Raistrick picked up a point from the previous Place Forum about secondary services and making services more community based. This may require a review of some of the headings within the Place Forum Outcomes Framework. Revised wording was suggested to a recommendation within the report. The Chair added that the move to an ICS may also require a review of the Board's constitution.

### **Resolved**

That the Board:

- 1) Notes the outcomes of the Place Forum held on 6 March 2019:
- 2) Endorses the concept of a Place Forum Outcomes Framework for oversight of performance across the system and to support the ongoing development of that framework; and
- 3) Notes the outline agenda items for the Place Forum on 11 June 2019.

## **8. Pharmacy Steering Group**

In May 2018 the Board agreed that a Pharmacy Steering Group be established to monitor and support the delivery of the recommendations included within the Pharmaceutical Needs Assessment (PNA). An update was provided on the progress that the group had made to date. The PNA made a number of recommendations, which were summarised in the report's background. Key areas of the report covered:

- The development of a dashboard to provide real-time access to information to monitor data from the PNA and inform supplementary statements.
- The six national pharmacy campaigns this year, with a plan to link local themes into these wherever possible. In addition, the group was planning to use Healthy Living Pharmacies to run local campaigns with local monitoring.
- Pharmacy, pharmacists and the NHS Long Term Plan. The steering group proposed to bring together a range of stakeholders across the STP to a workshop in May, to strengthen integration of community pharmacy and clinical pharmacists across pathways, promoting better outcomes for patients and optimising value from investment.

Reference was made to teenage conception and it was questioned why only some pharmacies were providing free condoms. A map was requested showing the

pharmacies that were participating in the scheme. This would be researched and a reply provided. The Chair noted that there had been some difficulties for homeless people in accessing pharmacy services.

**Resolved**

That the Board notes the update on the Pharmacy Steering Group.

**9. Forward Plan**

The Board reviewed its Forward Plan and the Chair asked for any additional items. Elizabeth Hancock suggested that the Healthwatch Warwickshire Annual Report be submitted to an appropriate meeting.

**Resolved**

That the Forward Plan is updated accordingly.

**10. Minutes of the Health and Wellbeing Board Sub-Committee**

At its meeting on 9 January 2019, The Board delegated to a meeting of the Sub-Committee, to consider the CAMHS Transformation Plan Year 3 Refresh.

The Sub-Committee met for this purpose on 22 March 2019. A copy of the report and supporting papers had been circulated and the Minutes of the meeting were submitted.

**Resolved**

That the Board notes the decisions taken by the Health and Wellbeing Board Sub-Committee at its meeting on 22 March 2019.

**11. Any Other Business (considered urgent by the Chair)**

Councillor Margaret Bell had asked the Chair for permission to submit a question to the clinical commissioning groups. This concerned a NHS England guidance document 'Improving Physical Health and Care for People Living with Severe Mental Illness in Primary Care' and the expectation for delivery of annual physical health checks for people with serious and enduring mental illness. A copy of the full question is attached at Appendix A to these Minutes. The Chair agreed that the question be provided to the CCGs and asked that a response be provided for Councillor Bell.

The meeting rose at 2.40pm

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Chair



Question from Councillor Margaret Bell to Warwickshire North and Coventry & Rugby CCG and South Warwickshire CCGs:

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NHS England has produced guidance to CCGs in a document entitled: 'Improving Physical Health Care for People Living with Severe Mental Illness (SMI) in Primary Care'.

This guidance sets out the NHS E expectation for delivery of annual physical health checks for people with serious and enduring mental illness. This relates to those individuals on GP Practice 'SMI' registers (i.e. those who have a diagnosis of Bipolar, Schizophrenia or other psychosis). The checks should include cardiovascular risks, review of smoking status, alcohol consumption, promoting access to relevant screening programmes (cervical, breast & bowel cancer where age-relevant), medicines review and general health enquiry. NHS E's strapline for this work is "don't just screen intervene" – i.e. patients should receive proactive support and appropriate follow-up to clinical and health promotion.

From April 2017 transformation funds entered all CCG's baseline funding to support increasing the delivery of the required physical health screening, improving access to physical health interventions beyond those incentives to be found in the current QOF framework and ensuring high quality training is in place for all staff responsible for undertaking the screening.

The NHS E target is for 60% of people on the SMI register to receive annual health checks, with 50% provided by primary care and 10% provided by CWPT for those under their care. The latest figures show that CWPT have achieved around 90% of their cohort and across primary care Coventry and Warwickshire currently sit at 22%.

Could the CCGs please:

1. Detail the actions they have taken in response to the additional funding and this report.
2. Provide the statistics on the percentage of SMI patients receiving these annual physical health checks within their Primary Care organisations
3. Set out their plans for taking this initiative forward within their primary care teams.
4. Provide the anticipated timescales for achieving the targets set out in this report.