

# Minutes of the Meeting of the Warwickshire Health and Wellbeing Board held on 9 January 2019

## **Present:-**

### Warwickshire County Councillors

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

### Warwickshire County Council (WCC) Officers

Dr John Linnane, Assistant Interim Director (Director of Public Health and Strategic Commissioning)

### Clinical Commissioning Groups (CCGs)

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

Dr. David Spraggett (South Warwickshire CCG)

### Provider Representative

Mike Williams (Coventry and Warwickshire Partnership Trust)

### Healthwatch Warwickshire

Elizabeth Hancock

### NHS England

Karen Davis

### Police and Crime Commissioner

Neil Hewison (Office of the Police and Crime Commissioner)

### Borough/District Councillors

Councillor Margaret Bell (North Warwickshire Borough Council) (NWBC)

Councillor Andrew Thompson (Warwick District Council)

## **1. Daily Mile**

The Chair thanked members of the Board who had participated in a mile walk around Warwick Town Centre at the start of the meeting and he spoke about the start of the year of wellbeing.

## **2. General**

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

Rachael Danter, replaced by Karen Davis (NHS England)

Russell Hardy (South Warwickshire NHS Foundation Trust)

Councillor Jacqui Harris (Stratford District Council)

Councillor Barry Longden (Nuneaton and Bedworth Borough Council)

Nigel Minns (Strategic Director for People Directorate, WCC)

Philip Seccombe replaced by Neil Hewison (Police and Crime Commissioner)

Jagtar Singh, replaced by Mike Williams (Coventry & Warwickshire Partnership Trust)

Prem Singh (George Eliot Hospital NHS Trust)

Councillor Leslie Smith replaced by Councillor Margaret Bell (NWBC)

Robin Wensley, replaced by Elizabeth Hancock (Healthwatch Warwickshire) (HWW)

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

None.

## **(3) Minutes of the Board Meeting held on 18 September 2018**

The Minutes were agreed as a true record.

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

The Chair announced that this would be the last Board meeting for Dr John Linnane who would leave the County Council on 21 March 2019. He paid tribute to his service to the County Council as Director of Public Health and recently also as Assistant Director for Strategic Commissioning. Dr Linnane responded, speaking of the improvements made over the last ten years and he had enjoyed his time at the authority. The Chair welcomed Sir Chris Ham, who had recently been appointed as Independent Chair of Better Health, Better Care, Better Value (BHBCBV) and he looked forward to working with him. He also welcomed representatives from Warwickshire hospices to the meeting.

## **3. Refresh of the Health and Wellbeing Strategy**

Rachel Barnes, Health and Wellbeing Board (HWB) Delivery Manager gave a presentation and introduced a report on the refresh of the Health and Wellbeing Strategy for the period to 2020. The high level priorities had been retained, with a focus on preventing ill-health and reducing inequalities, building resilience in communities and integrating services. The outcomes and areas of focus had been updated. The strategy would be supported by an annual delivery plan with areas of focus aligned to the joint Health and Wellbeing Concordat with Coventry.

The report set out the ten priority areas within the strategy and the statutory duties of the Board. The strategy included the development programme with Coventry Health and Wellbeing Board as the 'Place Forum', the Year of Wellbeing 2019 and the move towards Integrated Care Systems.

Subject to the Board's approval, the refreshed strategy would be published and shared with partner organisations. A communications strategy would be developed to support delivery of the HWB Strategy. Progress and priorities would be reviewed by the Executive Group.

The presentation highlighted the key messages on the areas of concern in Warwickshire and the ten priority areas. Questions and comments were invited. Noel Hunter of the Myton Hospice asked if more reference could be made to the third sector in the strategy and this point would be taken on board.

### **Resolved**

That the Board endorses the refreshed Health and Wellbeing Strategy.

## **4. Feedback from the Place Forum on 7 November 2018**

A brief presentation was provided by Ian Andrew, communications lead for the Year of Wellbeing to accompany the circulated report.

The presentation set out the areas of initial focus and gave examples of some of the current initiatives:

- NWBC staff day of wellbeing
- £10,000 contributions from Warwickshire Police, SWCCG, CRCCG and WNCCG
- Recruitment underway for project support to deliver additional capacity
- Planning time to talk day
- WCC trialling taster massage sessions for staff
- CWPT adopting daily mile: fit for life

He displayed some of the promotional materials being used to get people and organisations to make wellbeing pledges and spoke of recent events including attendance at a Wasps rugby match at the Ricoh Arena. Councillor Seccombe asked about the programme of events for the year of wellbeing, so these could be publicised by local councillors and organisations. She also referred to mental health and wellbeing. It was planned to provide frequent electronic newsletters to list forthcoming events and initiatives. Any person not receiving the newsletters currently was asked to get in touch, to be added to the mailing list. Neil Hewison of the Office of the Police and Crime Commissioner added that the Chief Constable had declared the Police participation in the year of wellbeing, referring particularly to sickness absence and stress aspects.

The report also gave an update on the Place Forum held on 7 November 2018. This was the fourth joint meeting of Warwickshire and Coventry's Health and Wellbeing Boards, with over 40 attendees from a range of organisations. The main aims of the session were reported. The Place Forum had endorsed the vision and high level plan for the year of wellbeing, agreed to develop an outcome framework to show how the Place Forum was adding value in delivering the Concordat and to provide updates on changes affecting the system.

Progress to date was noted. This included the development of a communications strategy and branding, training of storytelling 'bloggers', a range of physical activity in schools, organisations and services partnering the Year of Wellbeing and a wide range of commitments made by Place Forum partners. Updates would be provided via the website [www.yearofwellbeing.org.uk](http://www.yearofwellbeing.org.uk) and a newsletter.

The focus of activity up to the next Place Forum on 6 March 2019 was reported.

### **Resolved**

That the Board notes the feedback from the Joint Coventry and Warwickshire Place Forum held on 7 November 2018.

## **5. Better Together Programme and Adult Social Care Winter Fund 2018-19 Progress Update**

Dr John Linnane, Assistant Interim Director (Director of Public Health and Strategic Commissioning) presented this item on behalf of the County Council and clinical commissioning groups. Locally the plan for the period 2017 to 2019 focussed activities to improve performance in the four key areas which were measured against the National Performance Metrics, these being:

- a. Reducing Delayed Transfers of Care (DToc)

- b. Reducing Non-Elective Admissions (General and Acute)
- c. Reducing admissions to residential and care homes; and
- d. Increasing effectiveness of reablement

The report detailed each of these areas, giving context with actual and target performance data. Dr Linnane referred particularly to performance on DToC. The provisional data for November and December 2018 showed a similar pattern to that reported. On non-elective admissions, it was noted that these were higher for the north of the county. Dr Linnane also referred to reablement performance, advising that there had been a reduction in long term admissions to care for the first two quarters of 2018/19. He spoke of the closer working with district and borough councils as well as other housing providers and the grant support which was enabling people to live independently for longer.

The report then focussed on the High Impact Change Model (HICM). Progress continued to be made against implementing all eight changes in this model and the most recent self-assessment of progress was reported in a table. The report concluded with an update on the adult social care winter fund allocation, the associated conditions and agreed priority areas.

Councillor Thompson asked about the target setting on reducing long term admissions to care. Dr Linnane confirmed these were set by the Department of Health and some relatively small changes had been made for Warwickshire. Councillor Seccombe added that it was good to have an understanding of both targets and the direction of travel. Dr Linnane advised that a detailed report would be provided later in the month on this area to the County Council's Adult Social Care and Health Overview and Scrutiny Committee. It was agreed that this report be circulated to the Board for information.

In response to questions from Councillor Bell, Dr Linnane agreed to provide her more information about the higher data on non-elective admissions in the north of Warwickshire. She also referred to the HICM, particularly provision of a seven day service and a focus on choice, considering that the current position differed from that reported. Dr Linnane advised that all providers had signed off plans and measures were being implemented, but were not all yet fully in place.

Sir Chris Ham advised that the data for Warwickshire wasn't unusual. He referred to the announcement on Monday on the NHS ten year plan, the move to more out of hospital services and primary care and also the need to make the best use of the resources that the NHS had. John Linnane added to this referring to preventative measures, the role of social care and specific initiatives, examples being falls prevention, adapting properties, ensuring those on the edge of care were supported, social prescribing, health champions and the opportunity to expand some existing services. Elizabeth Hancock explained that HWW was looking at DToC and inappropriate transfers. She was also representing the Mary Ann Evans Hospice and offered to share details of a rapid response approach that was used by the Hospice.

## **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 areas of focus;
- 2) The progress against the High Impact Change Model; and

3) The Adult Social Care Winter Fund allocation, conditions and agreed priority areas.

## 6. Primary Care Financial Update

Karen Davis of NHS England (NHSE) presented this item. The Board had requested an overview of the main areas of spending in Warwickshire for medical (GPs), optometry, pharmacy and dentistry services. It was confirmed that NHSE had delegated primary medical care commissioning functions to the clinical commissioning groups (CCGs) and commissioning information on spend now lay with the each CCG.

A financial summary of directly commissioned services managed by NHSE was provided. Reference was made to Section 7A public health services. A table showed the directly commissioned services managed by NHSE, comprising screening, dentistry and optometry. This set out the actual spending in 2017/18, planned spending in 2018/19 and that information was also disaggregated across the three CCG areas.

The pharmacy budget for the West Midlands was £93 million for 2018/19. Due to the financial reporting of pharmacy contracts, it was not possible to disaggregate this to smaller geographical levels such as the STP area.

NHSE commissioned its services in line with national guidance and not necessarily by local patient need or demand. The majority of these services had experienced contract underspend, as a national access formula was used which was not entirely relevant for the West Midlands population. Councillor Seccombe asked if such underspends were retained in the Coventry and Warwickshire area, but it was confirmed such underspends were returned to central NHSE funds. She also asked if future budgets were based on that spent in the previous financial year and how local demand was factored in, for example to provide for additional optometry services. Karen Davis responded that NHSE did take account of population profiles and growth as well as making local adjustments. For services like optometry, there was nothing to prevent additional opticians from opening to provide NHS services as market forces would dictate. Account was also taken of service user satisfaction and feedback. Councillor Seccombe then spoke about new housing developments and the provision of primary care services. Whilst developer contributions could be secured for the premises, staffing them was another issue. Karen Davis replied that NHSE did have regard to data from the local joint strategic needs assessments. With regard to pharmacy, it was a complex picture, with some services being at distance from the new development, whilst others were located in supermarkets.

Councillor Morgan understood the original request had included details of spending on GP services by CCGs. There was some uncertainty if this had already been provided, but a briefing note would be issued.

Councillor Bell noted that the funding allocations were increasing. She asked for further information, including how often the population data on which funding was based, was updated. Karen Davis wasn't sure how frequently the data was updated, but she advised that local knowledge was applied, to reflect the needs of each area. Councillor Bell commented that population growth was causing a strain for some local services.

Councillor Roodhouse asked if NHSE would be changing its methodologies as a result of the new NHS ten year plan, to provide a focus on preventative measures. He considered that many of the current formulas were out of date, due to the pace of growth in some areas. Karen Davis acknowledged this point and referred to screening as an example. Joint planning work would be needed with Public Health, the STP and

GPs. She added that the methodology and current frameworks were only part of the process.

## **Resolved**

That the Board notes the information.

## **7. Better Health, Better Care, Better Value (BHBCBV) Programme Update**

An update was presented by Lorraine Laing from BHBCBV which covered the following areas:

- The appointment of Sir Chris Ham as independent Chair of Better Health, Better Care, Better Value
- Integrated Care System Update
- Clinical Strategy
- Transformational Programmes of Work
  - Proactive and Preventative
  - Maternity and Paediatrics
  - Mental Health and Emotional Wellbeing
  - Planned Care
  - Productivity and Efficiency
  - Urgent and Emergency Care
- Enabling Programmes of Work
  - Estates
  - Digital Health
  - Workforce
- Related Programmes of Work
  - Cancer
  - Stroke

Sir Chris Ham thanked the Board for its welcome and gave background on his previous roles. Until December he had been Chief Executive of the Kings Fund. He had worked at the University of Birmingham and been Director of Strategy for the Department of Health. He outlined his reasons for taking the position, speaking also about place-based working, the involvement of the third sector, the prevention agenda and getting people to engage. There was huge potential for the Coventry and Warwickshire STP area, but a lot of work to do.

Mike Williams referred to the NHS ten year plan and the funding and staffing requirements to convert the plan into reality. Chris Ham acknowledged this point as currently one in ten NHS posts were either vacant or filled on a temporary basis. This would be similar for social care. The UK couldn't continue its reliance on staffing from abroad and needed to fund the education and training of its future workforce.

Councillor Seccombe spoke about cultural change. The NHS was funded on activity performance which didn't translate necessarily to functions like social prescribing. Chris Ham agreed that this was a multi-faceted challenge. He referred to the recent plateau in life expectancy data and lifestyle choices around smoking, alcohol and some foods, which might require government influence through taxation. He spoke of the role of employers in regard to the year of wellbeing and supporting people to change their lifestyles. There was currently an over dependence on services.

## **Resolved**

That the Board notes the report.

### **8. Joint Strategic Needs Assessment (JSNA) Update**

Dr John Linnane gave a presentation to supplement the circulated report. At its meeting on 10 January 2018, the Board endorsed the delivery model for phase three of the JSNA programme. This involved the production of a suite of 20 needs assessments across the JSNA geographies. These were scheduled across four waves of approximately five areas, with each wave being completed over four to six months.

An update on progress was provided to keep the Board engaged with the programme. This explained the diversity of engagement approaches used, the 'big picture' analysis provided and the drafting of a report and recommendations for each area for stakeholder input. Action plans would follow once the recommendations had been agreed in each local area. Each area had differing needs, but the process had highlighted some common themes which were set out within the report.

The next steps were reported, including the communities identified for the second wave of the JSNA place based assessments:

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

Rachel Jackson of Nuneaton and Bedworth Borough Council (NBBC) confirmed that the first wave in its area had been completed with good engagement from both members and partners. The second wave would start the following day. Councillor Bell referred to the common themes, concurring that there were transport difficulties for rural areas. This was particularly the case where a health service was relocated, but it made it difficult for those reliant on public transport to access the revised service. There were ongoing efforts to address such transport difficulties.

## **Resolved**

That the Board:

- 1) Notes the updates for the first wave of the place-based JSNA programme;
- 2) Approves the proposed timeline for delivery of Wave 2; and
- 3) Agrees the proposed next steps, including the action planning process, as set out in the report.

### **9. Preventing Homelessness Update**

Emily Fernandez, Commissioning and Performance Lead, Public Health and Strategic Commissioning at WCC and Lisa Barker, Head of Housing at Warwick District Council gave a presentation to the Board.

A report had also been provided on a countywide conference on preventing homelessness. The conference brought together commissioners and providers to discuss system-wide solutions for preventing homelessness and rough sleeping. It examined the impact of housing on health, the countywide homelessness challenges, the early impact of the Homelessness Reduction Act 2017 and the impact of welfare reform on tenancies. A series of workshops were facilitated by expert partners. The conference was attended by over 150 delegates who listened to keynote speakers Dr Nigel Hewett of Pathway, the UK's leading homeless healthcare charity and Victoria Kell from the Ministry of Housing, Communities and Local Government. It was evident from the feedback received that there was an appetite for a countywide homelessness strategy. Acknowledging that district and borough councils were required to have such a strategy at a local level, stakeholders discussed the value in having a countywide perspective and vision. To that end, the Housing Board had sought this Board's approval to establish a Tackling and Preventing Homelessness Strategy Group to commence work on a countywide strategy, with reporting links directly to the HWBB.

Following the presentation from Dr Nigel Hewett on the Pathway model and the clear presentation of evidence based practice, the Housing Board also sought approval to begin looking into the feasibility of piloting the Pathway model in Warwickshire. It was further proposed to discuss appropriate membership for the group and a plan for how the Board would take this forward.

Questions and comments were invited. Mike Williams stated the importance of having on-street mental health services. He asked about the involvement of the police, which was confirmed. Rachel Jackson spoke of the close working arrangements between the police and NBBC in regard to both homeless people and beggars. Councillor Seccombe thanked officers for this useful report, also referring to the success of the conference. She supported the establishment of the strategy group and reminded of the funding allocation the County Council had made for a two year period. Reference was also made by both Emily Fernandez and Elizabeth Hancock to the HWW project on access for homeless people to primary care services.

### **Resolved**

That the Board notes the feedback, options and proposals, following the Countywide Approach to Homelessness Prevention Conference held on 27 September 2018 and gives its approval to:

- 1) Establish a Tackling and Preventing Homelessness Strategy Group and to establish reporting links directly into the Health and Wellbeing Board;
- 2) Commence work on establishing a Countywide Tackling and Preventing Homelessness Strategy; and
- 3) Begin looking into the feasibility of piloting the Pathway model in Warwickshire.

## **10. Briefing Papers**

The following reports were provided for the Board's information:

- (a) Warwickshire Education Strategy 2018-2023
- (b) Warwickshire Safeguarding Children's Board Annual Report 2017-18
- (c) Public Mental Health and Wellbeing Update
- (d) Forward Plan



Paul Senior, WCC Assistant Director for Education Services and Hannah Heath Business Improvement Officer spoke to the Education Strategy update. Mr Senior referred to the good Ofsted position in the County and this strategy set out plans for the years ahead. Hannah Heath referred the Board to the key priorities within the strategy, which was both a council wide and a partnership strategy.

Sir Chris Ham spoke about resilience and emotional wellbeing. Paul Senior replied that a range of approaches were used with children and their families, both at school and in the home. He spoke about links to mental health services, providing staff with the skills they needed and a pilot scheme that was underway. Work took place across a range of agencies to deliver a local system approach, which was one of the first in the country.

Elizabeth Hancock reported issues at a Nuneaton and Bedworth infant school with very young pupils being excluded and the difficulties this caused both for the pupils and teaching staff. Mr Senior agreed to speak to her outside the meeting.

Councillor Seccombe spoke about the work on the redesign of Child and Adolescent Mental Health Services, the need for community support, that children should feel safe both at school and in their home and that medical intervention was only used where necessary. It was noted that a combined scrutiny meeting was continuing to monitor the performance of the service provider and the next joint meeting would take place on 30 January.

Rachel Jackson spoke of the high teenage conception rates in the NBBC area. Mr Senior was aware of the issue, speaking about the current services and groups in place and offering to speak to NBBC after the meeting. Helen King added that there were two programmes in place targeted at primary and secondary school pupils. She also referred to the emotional and mental wellbeing work through BHBCBV on maternity outcomes and improvements and the multi-agency approach required.

### **Resolved**

That the Board notes the updates.

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

The Chair sought the Board's authority to convene a meeting of its Sub-Committee to approve the sign-off of the Better Care Fund budget arrangements for 2019/20 and to approve the CAMHS transformation plan for year three, as the approval of both actions was required before the next formal Board meeting in May. This was agreed.

The Chair advised that a public interest debate was planned for the morning of 20 February 2019 on the topic of health and social care. Finally he reminded the Board of the scrutiny review of GP services approved at the September Board meeting. The scrutiny committee was due to receive an update at its March meeting and officers would be in contact to gather evidence of how the review's findings had been implemented by partners.

The meeting rose at 4.25pm

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Chair