

HEALTH AND WELLBEING BOARD

DRAFT MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 13 JULY 2017 AT THE KENNET ROOM - COUNTY HALL, TROWBRIDGE BA14 8JN.

Present:

Cllr Baroness Scott of Bybrook OBE (Chair), Dr Peter Jenkins (Vice Chairman), Dr Andrew Girdher, Christine Graves, Nikki Luffingham, Angus Macpherson, Cllr Laura Mayes, Dr Richard Sandford-Hill, Mick Stead, Linda Prosser, Cllr Jerry Wickham and Carolyn Godfrey, Brian Stables and Cara Charles-Barks

112 Chairman's Welcome, Introduction and Announcements

The Chair welcomed all the meeting and made the following announcements:

Pharmaceutical Needs Assessment (PNA) 2018

As part of the requirement to undertake a Pharmaceutical Needs Assessment, a survey had been set up to seek residents' views. The PNA is being led by Public Health and supported by a stakeholder steering group. A draft would be considered in September, prior to a formal consultation period, and will return for final consideration in January 2018.

Dr Peter Jenkins

The Chair stated that Dr Peter Jenkins, the Clinical Chairman at Wiltshire Clinical Commissioning Group, would step down from his role at the end of September following a two-year term. She thanked him for his contributions and wished him well for the future.

113 Apologies for Absence

Apologies were received from Dr Toby Sutcliffe, Roger Hill Dr Andy Smith, Dr Toby Davies and James Scott.

114 Minutes

The meeting considered the minutes of the meeting held on 18 May 2017.

Resolved

To approve and sign the minutes of the previous meeting held on 18 May 2017

115 **Declarations of Interest**

There were no declarations of interest.

116 **Public Participation**

There were no public questions.

117 **Statement of Intent on Integration**

The Chair and Vice-Chair presented the Statement of Intent on Integration which set out the ambitions of partners for developing health and social care integration in the next few years.

Issues highlighted in the course of the presentation and discussion included: that Wiltshire Council had agreed its Business Plan for next 10 years, and that integration was one of the main priorities; the shifting of emphasis onto prevention and early intervention; that this complemented the joint work underway on children, the importance of social activities in promoting good health; how best to share risk and rewards across different services in the Health & Social Care system as a whole; the issues of shared governance and the role of the joint Commissioning Board; the importance of performance management; the agreement of the CCG Board to jointly appoint with Wiltshire Council a Corporate Director; how best to align budgets for shared issues; how specific issues about data sharing can be addressed; the importance of engagement with service users and carers; the importance of explaining which services were in scope; how best to communicate with the public to help them understand the changes and develop a narrative on integration with Healthwatch Wiltshire; and how best to involve the acute hospitals in the plans. At the conclusion of the discussion, the meeting;

Resolved

- 1. To formally endorse the Statement of Intent.**
- 2. To receive further updates**

118 **Carers**

Sue Geary, Wiltshire Council, presented the Memorandum of Understanding (MoU) which proposed an integrated approach to the identification and assessment of carers' health and wellbeing needs.

Issues highlighted in the course of the presentation and discussion included: the consultation undertaken in preparation of a strategy; that the formal adoption of

the strategy had been delayed to take into account the national carers strategy, but that this had been delayed; that an action plan had been developed in line with the draft strategy; that in the interim a template MoU had been developed, and that this had been tailored for Wiltshire; the involvement of different groups in the development of plans including Wiltshire Carers Partnership.

In response to the presentation, the Police & Crime Commissioner stated that he would be happy to present the MoU to the Local Criminal Justice Board which included a wider list of partners.

At the conclusion of the discussion, the meeting;

Resolved

- i) To note the progress with regards to the draft Carers Strategy and Implementation Plan;**
- ii) To adopt the Memorandum of Understanding “An integrated approach to the identification and assessment of carers health and wellbeing needs” and commits to working together to deliver against the principles in the MoU.**
- iii) To endorse the MoU as a document to which all partner organisations supporting carers in Wiltshire could sign to show their commitment to the principles set out within the document, and to the delivery of the Carers Strategy and Implementation Plan.**
- iv) To continue to encourage other, willing, partners to sign up.**

119 End of Life Care Strategy

Ted Wilson, Wiltshire CCG, and Kate Blackburn, Wiltshire Council, introduced the report which presented the refreshed End of Life Care Strategy for Adults 2017-2020.

Issues highlighted in the course of the presentation and discussion included: the work building on the first strategy developed in 2014; the progress that had been delivered, and the actions monitored by the joint board; how the voluntary sector are involved; that priorities should be reaffirmed, and how it aligns to national guidance; how Health Watch Wiltshire had taken a lead on some of the public engagement activities; the favourable national and regional average comparisons on certain indicators include allowing increasing number of people to die at home; that a future joint report would be delivered later in the year; how ambulances services are involved and appropriate care given; the importance of increased awareness amongst the community and the conversation should continue to use plain English; the improved out of hours access to palliative drugs; the improvements made to access to information and support given to hospitals; and that the strategy related to adults only, but that there was work

ongoing with children and their families (including on the implementation of the latest NUCE guidance).

At the conclusion of the discussion, the meeting;

Resolved

- i) To support the refreshed Wiltshire End of Life Care Strategy for Adults 2017-2020.**
- ii) To agree to an update on the delivery of the implementation plan with attendance from local hospices in the autumn.**
- iii) That officers should consider how best to refer, in the strategy, to the services available to children.**

120 Implementation of GP Five Year Forward View in Wiltshire

Jo Cullen, Wiltshire CCG, presented the report which provided an update on the five year programme.

Issues highlighted in the course of the presentation and discussion included: the previous consultation undertaken and the updates given to the Board; the delegated responsibilities to CCG from NHS England to procure primary services; the work undertaken regarding workforce and resilience; the progress made in year two of the plan, and the areas that will continue to need focused attention; the increasing number of practices that are facing resilience issues, for example practices closing; how partners work together to transfer people to other practices; that 19% of GPs are over 55, and the difficulties of recruiting staff to Wiltshire; how different service models and officer roles could be used to reduce the burden on GPs; (given 1 in 4 consultations could be undertaken by someone else); how best to meet improved access expectations; the impact of Brexit on recruitment; whether enough GPs are being trained; the implications of the larger age profile; the national initiatives to develop a broader team of multidisciplinary primary care staff and develop better telephone triage; the importance of educating patients; the evidence, including that from CQC inspections, shows that Wiltshire has some of the very best GPs, who are delivering service transformation despite significant pressures. are over 55, and the difficulties of recruiting staff to Wiltshire; how different service models and officer roles could be used to reduce the burden on GPs (given 1 in 4 consultations could be undertaken by someone else); how best to meet improved access expectations; the impact of Brexit on recruitment; whether enough GPs are being trained; the implications of the larger age profile; the national initiatives to develop a broader team of multidisciplinary primary care staff and develop better telephone triage; the importance of educating patients; the evidence, including that from CQC inspections, shows that Wiltshire has some of the very best GPs, who are delivering service transformation despite significant pressures.

Following the conclusion of the discussion, the meeting;

Resolved

- i) To note the progress and work to date in developing the General Practice Forward View (GPFV) Stage 2 Plan, recognising the role and input from the GP Resilience Board in providing clinical leadership and oversight of the resilience programmes;**
- ii) To note the complexity and synergy of the programmes under GPFV – such as the Integrated Urgent Care procurement to expand general practice capacity; the Estates and Technology Transformation Fund for development of investment in infrastructure; GP IT programmes to link to the Local Digital Roadmap work; the Vulnerable Practice programme with increasing numbers of practices in crisis; and training programmes for all staff groups to develop and enhance the widening skill mix of the primary care workforce;**
- iii) To note the GPFV Plan builds on the Wiltshire Primary Care Offer in place from April 2016 as a 3 year programme - based on the principles delivering primary care services at scale to support increased efficiencies and address issues of recruitment and retention of a competent, capable and resilient primary care workforce to deliver high quality services in primary care; and**
- iv) To note the details in the GPFV about the future models of care for larger organisational forms - Multi Specialty Community Providers or Primary and Acute Care Systems; with the commitment the foundation of NHS Care will remain the list based system of general practice.**

121 Integrated Urgent Care Procurement

Jo Cullen, Wiltshire CCG, presented the item which provided an update to the Board on the procurement of integrated urgent care

Issues highlighted in the course of the presentation and discussion included: that the procurement exercise had been running since autumn 2016; the role of an urgent care clinical advice hub; the complex nature of urgent care; the work of Health Watch Wiltshire to help the project to understand the issues faced by the public; the issues of transport, particularly for those in more rural areas; the impact of the military population; that the joint procurement had included services across the Banes and Wiltshire STP footprint; that NHS England had included urgent dental care in the procurement; that the project had moved into a preferred provider stage, and hoped to award contract in September; and that out of hours mental health services for children were not included in the procurement but that the links were recognised.

At the conclusion of the discussion, the meeting;

Resolved

To note the update

122 **Joint Strategic Assessment**

Kate Blackburn, Wiltshire Council, presented the report which provided an update on the Joint Strategy Assessment (JSA).

Issues highlighted in the course of the presentation and discussion included: the relevant statutory responsibilities of the board; the work undertaken specific to each community area; how the data had changed and how it was reflected in the document; how better benchmarking was undertaken against authorities with similar profiles; how the data can be shared with partners; and how the definition of wellbeing could draw upon the carers' definition.

At the conclusion of the discussion, the meeting;

Resolved

- i) To note the need to update the Health & Wellbeing JSNA for Wiltshire;**
- ii) To agree to support the work of Wiltshire Council to update the HWB JSNA in the format outlined below;**
- iii) To examine where action at a strategic level might continue to encourage further action across Strategic Partner Organisations to improve the Health & Wellbeing of the Wiltshire population.**

123 **Healthwatch Wiltshire Annual Report**

Lucie Woodruff presented the Annual report from Health Watch Wiltshire (HWW).

In the course of the presentation and discussion, the issues highlighted included: that this was HWW's fourth annual report; the engagement with the public on services such as dementia; the powers available to visit and review services; the role of volunteers in delivering the services; how the website and social media is being used to make contact; that dementia, and general primary care remained a priority; the work towards becoming accredited for support and development of volunteers; that local wellbeing guides had been developed; the improvement to information on Dementia and End of Life care; the creation of the Young Listeners project, which had received some national recognition; the priorities for action going forward including children and young people, particularly engaging secondary pupils; the project to set up Youth Watch Wiltshire; the planned visits of a HWW to each community area; how partners

can work with HWW to share intelligence and best practice; that the charity behind HWW had won the contract to provide similar services in the Somerset and Gloucestershire areas, but HWW frontline staff would remain separate and service would not be diminished but enhanced through a central office with specialists undertaking research.

The Chair thanked HWW for their update and for their constructive work in Wiltshire.

At the conclusion of the discussion, the meeting;

Resolved

- 1. To note and comment on the content of the Annual Report**
- 2. To recognise the progress which has been made during 2016/17 in fulfilling the statutory duties of a local Healthwatch**
- 3. To take up the offer for Healthwatch Wiltshire to share the outcomes from its engagement work as appropriate in the future.**

124 Wiltshire Safeguarding Adults Board Annual Report

Richard Crompton, Chair of the Board, presented the annual report of the Wiltshire Safeguarding Adults Board.

Issues highlighted in the course of the presentation and discussion included: the impact of the ageing population on the work of the board; that over 4000 concerns had been raised with less than 10% requiring further investigation; that the demand does appear to be levelling off following years of increases; that 60% of concerns were raised by professionals with 17% requiring further investigation; the plans to better integrate staff dealing with safeguarding issues through a multi-agency safeguarding hub (MASH)) for adults; the development of new staff guidance and training to raise awareness; the launch of a new website; that financial support had been secured from the Police and the CCG to add to the contributions from Wiltshire Council; that good support was being provided from partners; that recommendations for two safeguarding adult reviews had been received and lessons learnt can be reviewed; that work was ongoing to cement the relationship with Children's Board to cover transition issues.

The Chair, Richard Crompton, specifically thanked partners involved in World Elder Abuse day, and stated that he looked forward to continue to work with partners to raise the profile of the issues regarding the Board and its work.

In answer to a question from Councillor Jerry Wickham, Richard Crompton that in some performance measures some authorities delivered a nil return which

would then skew the national average, but that Wiltshire's performance was similar to authorities of a similar size.

At the conclusion of the discussion, the meeting;

Resolved

- i) To note the publication of the Wiltshire Safeguarding Adults Board Annual Report**
- ii) To agree to support the work of the Wiltshire Safeguarding Adults Board**
- iii) To agree to an annual update from Wiltshire Safeguarding Adults Board and to receive additional items as required (including annual business plans and safeguarding adults reviews).**

125 **Date of Next Meeting**

It was noted that the date of the next meeting would be changed, and that partners would be informed once a date had been arranged.

126 **Urgent Items**

There were no urgent items.

(Duration of meeting: 10.00 am - 12.12 pm)

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