

WILTSHIRE HEALTH AND WELLBEING BOARD

MINUTES OF THE WILTSHIRE HEALTH AND WELLBEING BOARD MEETING HELD ON 25 SEPTEMBER 2014 AT KENNET ROOM - COUNTY HALL, TROWBRIDGE BA14 8JN.

Present: Peter Hill (Chief Executive of Salisbury Foundation Trust), Angus Macpherson (Wiltshire Police and Crime Commissioner), Christine Graves (Healthwatch Wiltshire), Cllr Laura Mayes (Cabinet Member, Children's Services), Dr Gareth Bryant (Wessex Local Medical Committee), James Scott (Chief Executive of Royal United Hospital), Carolyn Godfrey and Maggie Rae (Corporate Directors, Wiltshire Council), Deborah Fielding (Chief Officer CCG) and Simon Truelove (Chief Finance Officer CCG), Dr Julie Hankin (Avon & Wiltshire Mental Health Partnership), Debra Elliott (NHS England), Dr Toby Davies (CCG – Chair of Sarum Group), Dr Helen Osborn (CCG – Chair of WWYKD Group), Cllr Jane Scott OBE (Chairman and Leader of the Council)

Also Present:

Kevin McNamara (Great Western Hospitals), Cliff Turner (Independent Chair of Wiltshire Safeguarding Children Board), Nick Wilson and Joanna Bates (South Western Ambulance Services Foundation Trust), James Cawley, Frances Chinemana, Julia Cramp, Robin Townsend and Laurie Bell (Associate Directors, Wiltshire Council), David Bowater (Corporate Support, Wiltshire Council), Emma Cooper (Chief Executive, Healthwatch Wiltshire).

56 **Chairman's Welcome and Introduction**

The Chairman welcomed everyone to the meeting, reminding all present that this was a public meeting where members of the public were encouraged to become involved in the debate that would arise.

57 **Apologies for Absence**

Apologies were received from:

- Nerissa Vaughan, Great Western Hospitals
- Cllr Keith Humphries
- Ken Wenman, South Western Ambulance Service NHS Foundation Trust

- Cllr Ian Thorn
- Jacqui Chidgey-Clark

58 **Minutes**

The minutes of the previous meeting held on 25 September 2014 were approved as a correct record with the following amendments:

That reference to the Shingles update, that 90 years be replaced by 79 years.

59 **Declarations of Interest**

No declarations of interest were received.

60 **Chairman's Announcements**

Signing of Mental Health Crisis Care Concordat

The Chair stated that she was pleased to announce that the concordat had been signed just prior to the start of this meeting. The concordat had previously been considered by the Board, and she extended her thanks to those that produced it, and stated the Council and Partners would work to honour it.

Updates on Mental Health Strategy

The Chair stated that, as discussed at the last meeting, the strategy was set to go to consultation shortly and a full update together with a draft action plan will be available at the next meeting on 20 November.

Shingles Vaccination

Debra Elliott from NHS England updated on the activity of the working group. A written update was circulated at the meeting. Additional work could be undertaken to generate some local press releases and campaigning to support the national campaign.

Winterbourne View

The Chair stated that work continued to move 9 ex-Winterbourne View patients to appropriate placements in the local area.

End of Life Care

The Chair stated that the first meeting of the care at home sub-group and the intention for a full update on 20 November.

Sustainability in the Health and Social Care

The Chair stated that, prior to the meeting, there had been a presentation from Dr David Pencheon on sustainability in the Health and Social Care. The Council and partners had agreed to consider his proposals. Officers would be asked to disseminate further information to partners about what was discussed with a view to bringing the issue back to another meeting of the Partnership.

Avon and Wiltshire CQC Report

Dr Julie Hankin stated that 150 inspectors inspected facilities across the whole trust, including all the inpatient, community, crisis teams and ECT team sites in Wiltshire. The key messages arising from the report included some warning notices, one of which related to Wiltshire regarding the learning from incidents. Other warning notices related to environment issues on sites outside of the Wiltshire Area.

The Chair noted that a more formal update, regarding actions, was scheduled to come to the next meeting.

61 **Children's Health and Wellbeing**

A) Children's Community Health Services

Julia Cramp, Associate Director for Commissioning, Performance and School Effectiveness, provided an update on the timetable for re-commissioning of Children's Community Health Services.

Attention was drawn to the fact that it was a joint commissioning project, and that there had been a range of activities, including events and surveys, to engage with relevant groups. This had built on some existing engagement work on previous strategies. The timetable for the procurement process had been set, and would include a marketing event to any interested providers. The deadline for new contract is January 2016.

Some partners expressed concern of the potential negative impacts of the process, and officers stated that they were aware of these issues and wished to build on the good work that already exists.

Reference was made to the experience of the procurement of CAMHS and the impact that had had on service quality. As this was a priority area, it was agreed to this should be discussed at a future meeting.

Resolved to note the report.

B) Disabled Children's Charter

The meeting noted that, a year ago, the Board had signed the Disabled Children's Charter, which had been developed by a range of bodies. The report set out how the Board was meeting the 7 standards of the Charter. *Areas of*

strength included engaging with children, young people and their families, Wiltshire was noted as an area of best practice; and that strong governance, including through the sub-group of Children's Trust to contribute to this agenda.

The Chair stated that this positive message should be shared.

Laura Mayes it was note that the Children's Minister had visited the Council and had been impressed with Wiltshire's approach including the use of one telephone number and there being a single point of contact, used to sign post parents to the right help. The importance of ensuring that the Doctors and healthcare professionals are aware of this new contact number was reiterated.

Resolved to note the report.

62 **Joint Strategic Assessment (JSA)**

Maggie Rae, Corporate Director, Wiltshire Council, presented the Joint Strategic Assessment which would inform the development of the Health and Wellbeing Strategy to ensure local priorities were met. It was noted that the the Board had previously agreed to refresh the Joint Health and Wellbeing Strategy one year on. It was acknowledged that there had been a number of changes in the past 18 months, including the publication of the Better Care Plan, that would need to taken account of.

In response to a question, officers clarified that the data collected as part of the JSA would be Peter Hill – clarity that it is a collection of data that will inform subsequent strategies.

Jane – want to make sure that Wellbeing, not just Health. Can we set in place update on our stragtegy taking in the relevant evidence. Officers expressed a desire to work with those partners that have recently joined the Board and to make sure they are engaged. Officers were asked to convene an operational working group to consider issues arising from the JSA.

RESOLVED:

- 1. To note the content of the JSA for Health and Wellbeing 2013-14.**
- 2. To agree to begin the refresh of the Health and Wellbeing Strategy for Wiltshire, to be informed by the content of the JSA for Health and Wellbeing.**
- 3. To agree that the JSA for Health and Wellbeing continues to form part of this Board's workplan and approve the timeline for producing the refreshed Health and Wellbeing Strategy and the JSA for Health and Wellbeing 2014/15.**

63 **Annual reports**

a) Wiltshire Safeguarding Children Board

Cliff Turner, Chair of the Wiltshire Safeguarding Children Board, presented their annual report. In his presentation noted that Ofsted had inspected the Board in 2013. This was followed up with an optional peer review in 2013 which helped the Board to address issues arising from the review. These included improving representation and relations with the Clinical Commission Group and NHS England, which had since been addressed.

The Board wished to improve the engagement of young people, and take a more analytical view on the Safe Guarding system and how it works for young people locally. Looking forward, the Board wanted to make sure scrutiny of local arrangements was good, keeping a focus on neglect, early help – getting involved with issues to prevent serious damage; makin sure training reflects current needs and priorities – offering on a multi-agency basis – giving a chance to promote links with partners. A child sexual exploitation (CSE) strategy group, chaired by Clive Turner, was looking at efforts to tackle these issues. Arising from this work would be a number of activities to raise public awareness of CSE, and what people can do, with an aim to promote a zero tolerance approach. This will be a focus of the Wiltshire Assembly. That said there was recognition that, whilst it should be a priority, the extent CSE should be kept in perspective as more children are at risk of neglect and other forms of abuse. Officers offered a more extensive briefing about CSE prior to the next Health and Wellbeing Board meeting. It was noted that following a request, a representative from the Bath RUH would be invited to the Wiltshire Safeguarding Children Board. The Chair thanked Mr Turner for his presentation.

Resolved to note the Wiltshire Safeguarding Children Board (WSCB) Annual Report 2013-2014.

b) Public Health Annual Report

Maggie Rae, Corporate Director, Wiltshire Council, presented the Public Health Annual Report, which had been considered recently by the Health Select Committee It was noted that this was the first year that Public Health had reported from within the wider family of the Council. It was noted that Health and Social Care Act had presented officers with a good opportunity to work with partners like NHS England on issues such as Shingles Screening. It was noted that integration of public protection, leisure and public health should have a positive impact on effective working. This integrated system has been tested in

the last 12 months, including with recent measles outbreak and local flooding. Officers were pleased with how these have been dealt with.

Areas that continued to be a priority included: Smoking cessation, Health Trainer programme, Excess weight in school age children and adults, and cardiovascular disease.

Resolved to note the Public Health Annual Report 2013-14

64 **Healthwatch update**

Healthwatch Wiltshire

Emma Cooper, Healthwatch Wiltshire, presented the initial findings of a review of complaints processes in Wiltshire. In the presentation and subsequent discussion, it was noted that complaints, feedback from customers, are valuable data for improving services. The NHS Constitution makes pledge to encourage feedback. In the light of some fatal failures, such as Staffordshire Hospital, reviews had highlighted the need to overhaul complaints system nationally. Healthwatch had led a national campaign calling for improvements to the system. A local review had been undertaken to feed into the national picture. It had been an opportunity to talk to providers, to identify gaps and areas of best practice.

The experience of users was that the system can be confusing and hard to navigate. There isn't standard language, across different providers in health and social care, and this can add to the confusion. There had been too many instances that information, on websites for instance, was not up to date, sign posting people to the wrong people, and that information for those with learning difficulties were often the most out of date.

Some young people are too scared and/or embarrassed to raise a concern, and it was recognised that raising concerns can be challenging and upsetting. Some people want to raise feedback outside of formal complaints. The issue of how anonymous trend information could be shared with Health Watch, and how can innocent bystanders raise concerns.

Examples of good local practice included GWH voicebook, Salisbury Hospitals app, and Ambulance Trust's 'getting in touch' leaflets which use good plain English. Most providers are in the process of reviewing their procedures and providers were encouraged to make sure their website and documentation is up to date.

A national report will be presented to Government shortly. Healthwatch did not look at Social Care complaints but will shortly as part of other review. It was noted that there was an invitation to providers to invite Healthwatch to work with them on engaging with young people.

Resolved

- 1. To note the content of Healthwatch Wiltshire's report on complaints and concerns.**
- 2. To approve the recommendations, outlined in the report, which are designed to improve the complaints system for the benefit of patients, service users, and carers.**

65 **Better Care Plan**

Better Care Plan

James Roach, Integration Director, Health & Social Care, presented the latest update on the Better Care Plan and the 100 day challenge.

In the presentation and subsequent discussion, it was noted that Wiltshire was one of five localities nationally that have signed off their plan; That there was real need to move the plan into action, the 100 day challenge seeks to address this; and that Risk Share Agreement identified a Wiltshire target of 3.75% reduction in hospital admissions.

As part of the 100 day challenge, officers were able to measure data on a daily basis so that problems could be dealt with swiftly. The focus was on self support and self care, involving the voluntary sector, to improve delivery. The one number, single point of access has been launched – this has been made available to secondary care staff. The three demonstrator sites were progressing well, with an aim to go live in December. A national funding award on Single View of the Customer could be forthcoming. The key risks, especially managing demand, were identified in the report.

Partners expressed pleasure with the efforts so far and wished to see the current level of performance sustained. It was recognised that some hospitals were seeing more positive results than others, and that ensuring the workforce was appropriately trained and resourced was key. Wiltshire Council was planning to develop an in house academy for social workers, and it was a future ambition to possibly extend this train health workers for the future. It was recognised that recruiting staff in some areas of Wiltshire was a real challenge; it was hoped that families returning from overseas military stations would provide some recruitment opportunities.

Officers were asked to circulate the slides to partners for their information.

Resolved

1. To note the update on the Better Care Plan in particular its continued status as part of the national fast track process.
2. To note the change in admission avoidance ambition to a 3.75% reduction from an original ambition of 4.5 % in line with the national requirement, and that this represents a significant challenge for the system given current demands on the system.
3. To note that the ambitious aim to reduce non-elective length of stay by 2 days has also been retained.
4. To support the engagement programme that is currently being undertaken locally with each of the area boards.
5. To note the progress that is being made as part of the 100 day challenge.

66 **Right Care 2**

Joanna Bates, Clinical Development Officer, from South Western Ambulance Service NHS Foundation Trust (SWAFST) presented plans to reduce conveyance to Emergency Departments.

In the presentation and subsequent discussion, it was noted that the aim of the scheme was to keep people out of A&E and staff across the trust area had reduced the number taken there. The first phase of the scheme to identify the reasons that people are referred to hospital. Pilot schemes were using clinical staff to assess patients over the phone to determine where patients should best be treated. The trust was looking to develop skills for staff so they feel able to discharge people at the scene, and looking at how GPs can participate in telephone triage and assisting crews in preventing admissions to hospitals. Improvements in access to patient's electronic records and sharing information to enable crews to access information on site to improve care from the crews. The Trust was in discussions with Higher Education providers to develop a diploma to train staff in advanced assessment.

The second phase of the scheme was looking to map community services, and focus on appropriate conveyance of non-urgent cases to community care, particularly those with long-term care needs. It was hoped that this would improve patient experience of care. It was recognised that further work could be undertaken in partnership with colleagues from hospitals and mental health services to improve outcomes for patients. The impact of the closure of facilities outside of Wiltshire was noted. The Chair thanked officers for their presentation.

Resolved to note the presentation.

67 **Funding Transfer to Social Care**

The Board was formally asked to approve the use of the funds outlined in the report and to authorise the transfer from NHS England.

Resolved

- 1. To endorse the use of the S256 transfer as set out in the report.**
- 2. To authorise the relevant Council officers to sign off the S256 Agreement between Wiltshire Council and NHS England and request that an invoice is raised to NHS England so that the transfer can take place.**

68 **Date of Next Meeting**

The Chair reminded the Board that the next meeting was on Thursday 20 November 2014, at the usual time of 3pm, to be held at County Hall, Trowbridge.

69 **Urgent Items**

There were no urgent items.

(Duration of meeting: Times Not Specified)

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