

Adults' Health and Wellbeing Commissioning Group

A meeting of Adults' Health and Wellbeing Commissioning Group was held on Tuesday, 25th November, 2014.

Present: Peter Kelly(Chairman), Cllr Jim Beall, Sarah Bowman, Emma Champley, Liz Hanley, Sean McEneaney, Simon Willson, Hilary Hall, Jayne Herring

Officers: Margaret Waggott, Jenna McDonald(LDS)

Also in attendance: Lynn Whiteman(STEPS), Jackie Booth(PH Shared Services), Professor Carolyn Summerbell(Durham University)

Apologies: Karen Hawkins

1 Declarations of Interest

Liz Hanley declared a personal non-prejudicial interest as item 4, Community Bridge Builder came under her Service Area.

2 Minutes of the meeting held on 22 October 2014

Consideration was given to the draft minutes of the meeting held on 22 October 2014.

AGREED that the minutes be approved.

3 Community Bridge Builder

Members received a report that provided detail on STEPs Community Bridge Building (CBB).

The Group were informed of the different services which STEPs CBB currently provided and it was explained that the 6 domains of CBB were:

- Employment
- Volunteering
- Education/Vocational training
- Health/Well-being
- Art/Culture
- Sport/Leisure
- Faith

Key points were highlighted as follows:

- Members noted that the proposal was an enhancement to the existing CBB service in order to deliver services to individuals who were not eligible to the STEPs service under FAC's. Members heard that there was a great need for social inclusion for this group that leads to better health and wellbeing and reduced health inequalities.

- Members heard that by providing flexible, person centred support, STEPs CBB worked with individuals and supported them to achieve their aspirations and a life within their communities.

- CBB supported clients accessing services such as the Smoking cessation Service
- An Enterprise programme was in place to allow STEPs to identify any potential barriers to social inclusion and to set out the individual steps needed for a client to achieve and sustain community engagement
- STEPs aimed at working with people to help them become more independent before hitting crisis point

The Group discussed the following points/questions:

- Members asked whether services were offered to those people who did not fall under FAC's criteria. In response, Members heard that those people who fell into the moderate and low categories could also access services.
- When referring to the 96% success sustainability, how often was this reviewed/measured? It was highlighted that this was reviewed 6 and 9 monthly.
- The Group referred to the section of the report which stated that STEPs planned on working with 120 clients over the 3 year programme. The Director of Public Health asked what distinguished those 120 people. In response, it was highlighted that the 120 individuals would be identified by contact with services such as Community Groups, Social Services, and Occupational Therapists etc. The Director of Public Health explained that because the service was a preventative service which required funding, it is important to understand the level of need in the community and the extent to which this service meets that need.
- Members asked which tool would be used to find services that matched the needs of individuals. It was highlighted that it was essential for the eligibility criteria to be right; some people had identified needs but did not choose to go to a social worker.
- The Group were informed that the budget money came from the Public Health Grant and was not included in the Big Ticket review.

RESOLVED:

1. That the report be noted and the 3 year commitment for the Public Health Grant be approved.
2. That the effectiveness of the programme be reported back to the Group and be monitored.

4 Sexual Health Review

Members were provided with a report which provided an overview of the process to be undertaken regarding the review and re-procurement of the Tees Integrated Sexual Health Service. Governance details were also detailed within the report.

Key points were noted by the Group as follows:

From 1st April 2013 responsibility for commissioning different aspects of sexual health services was split across a number of commissioning bodies. The provision of open accessible sexual health services became a mandated responsibility for Local Authorities.

Local Authorities inherited the largest proportion of contract responsibility for sexual health services totalling £3.9m annually across Teesside.

In November 2014 the Tees Valley Public Health Governing Board (TVPHGB) provisionally agreed a two month extension of the current sexual health contract for a further two months until the 31st March 2016. The NHS Area Team also agreed to the extension period, however, a decision was currently awaited from the two CCGs to support this before beginning negotiations with the service provider.

Aims and objectives were highlighted to the Group which included:

- Reviewing the evidence base
- Reviewing the current delivery of sexual health services in Teesside.

It was explained that following a discussion with other commissioners, SBC would act as the lead authority for the procurement process, consultation and legal advice required on behalf of the other three Local Authorities.

The Tees Valley Public Health Shared Service (TVPHSS) Governance Board oversaw the commissioning of sexual health services for Local Authorities in Teesside. It was heard that regular updates on the progress of the service review were to be shared with the Governance Board who would then be the final decision maker on all recommendations with regards to the service specification.

The Group raised the following points:

- Members agreed that a closer democratic accountability should be formed in order for local people to decide how to spend their money wisely
- The Director of Public Health suggested that the Governance Board should have been named as the arbiter as opposed to the final decision maker
- Members agreed that the Group needed to ensure the best possible value for money, for example taking into consideration elements of profit in any bid.
- The Cabinet Member for Adult Services and Health had worked closely with the Leader of Blackpool Council and highlighted that Blackpool had driven down teenage conception rates. Members were informed that this was an area that should be looked at and compared to other models which had succeeded.

RESOLVED that:

1. The programme of work be noted by the Group
2. The Governance arrangements for the service review and re-procurement be

noted by the Group

3. The Group would work with Local Authorities for Middlesbrough, Hartlepool and Redcar and Cleveland to jointly commission an integrated sexual health service for Teesside.

5 Weight Management

Professor Carolyn Summerbell, Principal of John Snow College at Durham University attended the meeting to provide Members with a report on Weight Management. The report provided a mixed methods service evaluation of the impact of a pharmacy-led weight management service for adults in Stockton-On-Tees which was carried out between November 2013 and September 2014.

The following points were noted by the Group:

Results of the evaluation identified that it was feasible to recruit people from the most deprived wards in Stockton-On-Tees to a community pharmacy weight management intervention

12 people completed the intervention and the majority of the 12 experienced a reduction in weight, waist circumference and BMI in addition to an increase in wellbeing scores. Members heard that the intervention was on par or better when compared with other lifestyle weight loss interventions

The cost of the intervention was £100 per patient which included 5 visits over a 12 week period

The initial aim was for 10 pharmacies in Stockton-On-Tees most deprived areas to take part in the programme. 8 pharmacies took part and aimed to recruit 10 people onto the programme. 55 participants entered the programme and 12 completed.

Lack of pharmacist availability was a primary barrier to service delivery as pharmacists shift patterns and working hours posed a problem when booking sessions with service users.

It was highlighted that the entry criteria for the programme was a BMI of 25 or over

Service users and providers that took part in the programme identified the following points:

- Ease of access was a key aspect including the location of where the service was provided
- The importance of having the right person deliver the service was fundamental to service success
- Service users liked the 1:1 tailored approach
- Service users felt happier and healthier as a result of taking part in the programme
- Changes in dietary habits and weight had been reported during follow up interviews with service users who did not complete the intervention.

The Group were informed that the evaluation found that for most of the users, the intervention was a success.

Members discussed the following points/questions:

- Members asked about the content of the programme and heard that the content was healthy eating advice and did not provide information on exercise
- It was highlighted that nobody who took part in the programme was middle or upper class
- Members asked how Pharmacists/Pharmacy Assistants learnt how to approach clients and in response heard that they worked from a script and received training

It was explained that Public Health officers would like to take the programme further and offer to more pharmacies. If funding was received successfully, research would be taken further with a target of a bigger project. The Director of Public Health informed Members that there was potential for a high level of research funding in the programme. Members heard that a Local Randomised Controlled Trial may help when applying for funding.

RESOLVED that the information be noted.

6 Forward Plan

The Group were presented with a Forward Plan and discussed items which were to be scheduled for future meetings as follows:

20 January 2015:

- Market Position Statement
- GP Commissioning Health Checks
- Governance Board

17 February 2015:

- Better Care Fund Joint Commissioning(BCF)

24 March 2015:

- Healthy Heart Check Update
- Domestic Abuse

RESOLVED that the information be noted.