

Health & Wellbeing Board

A meeting of Health & Wellbeing Board was held on Wednesday, 25th May, 2016.

Present: Cllr Mrs Ann McCoy(Chairman), Cllr Sonia Bailey, Cllr Lynn Hall, Cllr Di Hewitt, Peter Kelly, David Brown, Alan Foster, Sheila Lister (Substitute for Audrey Pickstock) Steve Rose and Ali Wilson

Officers: Michael Henderson, Sarah Bowman-Abouna (SBC), Donna Owens (CCG), Nathan Duff (Catalyst)

Also in attendance:

Apologies: Cllr Jim Beall, Cllr David Harrington, Tony Beckwith, Barry Coppinger, Audrey Pickstock and Jane Humphreys

1 Declarations of Interest

There were no declarations of interest.

2 Minutes of the meeting held on 27 April 2016

The minutes of the meeting held on 27 April 2016 were confirmed as a correct record and were signed by the Chair.

During consideration of the minutes the following areas were discussed:

Members were supportive of the GP Federation becoming a member of the Board.

Members noted that the four Development sessions, that the Board had agreed to hold, in order to formulate an Action Plan around the recommendations coming from the Peer Challenge, had proved extremely difficult to arrange. It was agreed that, as an alternative, an all day session be identified, which was likely to be easier to arrange.

Community Pharmacy consultation had closed and it was indicated that all local authorities had been consulted. It was unclear what route this consultation had been fed into, as local authority members indicated that they had not received any official consultation request.

3 Minutes of Partnerships

Adults Partnership held on 5 April 2016

Children and Young People's Partnership held on 20 April 2016

Members received a report introducing the minutes of the Adults' Health and Wellbeing Partnership and the Children and Young People's Partnership meetings, as detailed below:

- Adults' Health and Wellbeing Partnership - 5 April 2016
- Children and Young People's Partnership - 20 April 2016

4 Commissioning Group Minutes

CYP Commissioning Group - 12 April 2016

Members were provided with the minutes of the Children and Young People's Joint Commissioning Group held on 12 April 2016.

RESOLVED that the minutes be noted.

5 Learning Disability Transforming Care

The Board was provided with an update on progress regarding the North East and Cumbria's Transforming Care Programme and Local Delivery.

Members were reminded that there were regional and local elements to the Transformation of services, within the North East & Cumbria (NE and C):

- Regional approaches and,
- Local Implementation Group

The Regional elements were developed to ensure that duplicated areas of need were addressed once, and that localities benefitted from the scale at which the work would happen.

Locally, the ambition across the NE and C was to reduce current Assessment and Treatment beds and specialised commissioning beds.

Developing and strengthening local community based services and support was a key priority for Health and Social Care, to ensure that there continued to be a reduction in the over reliance on inpatient facilities, for people whose needs could be met outside of hospitals.

It was explained that the Tees Integrated Commissioning Group (TIC) had identified three key areas to build upon the progress already achieved locally:

- Crisis Care and Early Intervention
- Workforce development
- Community Infrastructure.

It was anticipated that, through the delivery of these specific areas of the Tees Fast Track Locality Plan that there would be a stronger prevention and intervention response to people who may require high levels of care and support.

The CCGs and Local Authorities were working together to support development of a community based support register which would use risk stratification to identify people with a learning disability who were at risk of admission in the community.

There had been a number of successful transitions to the community for people who had been in inpatient settings for some years, many purely because there were no services available that could meet their needs locally. The improved quality of life now experienced by these individuals was evident. Examples included people who had been in hospitals and various care settings since childhood now living a full life with a job and a very active social life, taking holidays and spending time with their families in their own home.

A further bid for Tranche 2 Transition Funding, from NHS England had recently been completed and submitted, including completion of a Finance and Activity Plan. Should the NE&C be successful in acquiring the funding, a process for the dissemination of funding to locality areas would be developed.

The Board discussed the report and the following points/issues came out of that discussion:

- planning for discharge of a patient was undertaken well in advance and there were strict timelines around when people would move on.
- there was concern around out of areas placements and the resource implications there would be for the CCG and Council.
- implications for mental illness units in terms of the need to reorganise wards to allow patients with learning disabilities and mental health problems, to be admitted.
- reduction in beds within secure services may place a pressure on learning disability beds. This was a new demand but difficult to predict.
- reduction in beds may not create the commensurate reduction in budgets as the most challenging patients would still be in hospital. Also, supporting some people in the community wasn't always the least expensive option.
- if the Tranch 2 non-recurring funding bid was unsuccessful it would create pressures for the CCG and local authorities and would slow the pace of transition.
- there were around 2000 individuals with learning disabilities in Stockton, with 10 inpatients.

RESOLVED that the report be noted and an update be provided to the Board's September meeting.

6 A Fairer Start - Annual Report to Health and Wellbeing Board 2016

The Board considered a report relating to the Fairer Start initiative.

Members were provided with background to the initiative and it was explained that it had originally started as an unsuccessful Big Lottery Bid. It had been felt that the approach had considerable merit and the Council, CCG and VCS had agreed to take it forward. It was a multi agency approach where people were working very closely together and information sharing. The approach was aimed at giving children the best start in life. The project was focused on Stockton Town Centre Ward but good practice was already embedding across the rest of the Borough.

The main areas of focus were:

- social and emotional development.

- speech and language development.
- nutrition

The Board considered the report and there was specific reference to:

- the community champion programme, including information about the outcomes for families.
- the workforce development and shared learning programme, capturing what was needed to make a difference.
- evaluation of the programme
- security of further funding was needed for 2019 onwards
- Important results would come through in 2 to 3 years, when, hopefully, fewer people would be coming to social care from this area, more children would be school ready, obesity and tooth decay would have reduced etc.
- The concept of the initiative had always been to roll out to families who need help, no matter where they were located in the Borough.

RESOLVED that the report be noted.

7 Sustainability and Transformation Plan/Better Health Programme

Members were provided with a brief update on the Sustainability and Transformation Plan.

The STP wasn't about taking away the work already done in other plans and strategies. The STP would look at what could be done better together. There needed to be some overarching value in dealing with the bigger issues and look to sustain and improve health and wellbeing outcomes and care for patients, and help with integration. The Better Health Programme was part of it and was part of the thinking of sustaining hospital services on site and what could be done out of hospital e.g. integration with social care, keeping people well and in their homes/community. Managing diabetes and long term conditions in a better way.

The Board was provided with a version of an engagement document on the Better Health Programme - a framework for the future

The document identified a framework, which would have to be delivered within financial resources, for how care should be provided in the future and this would be shared with the public and staff to seek their views on how this could be developed, to provide patients with the best care and the best experience, and the best outcomes in the future. Framework:

- Care should be delivered through a network of hospitals and community services.
- More seamless care should be provided close to or in the patient's home where safe and effective, with access to urgent

and community care 24/7.

- Patients should only be admitted to hospital where it was no longer safe or effective for them to be cared for in the community.
- There should be access to specialist opinion 24/7 where this improved outcome, for example, heart attacks, stroke, trauma, or internal bleeding.
- Planned care should be organised so that there is no unnecessary waiting, no cancellations and patients are not exposed to risk of infections

The Better Health programme was about quality and improving standards of care and this would need to be done by re-organising services.

It was noted that during engagement there had been concerns about travelling further and it was agreed that assurances needed to be given that people would get a better outcome through such an approach and there should be evidence to support this.

It was noted that, around November this year, there would be some options that the public would be consulted on.

Members noted that a key aspect of Sustainability and Transformation Plan was to identify funding and efficiency gaps and consider how things could be done differently in the future. There was a request for a report on funding implications to come to a future meeting.

RESOLVED that the update and engagement document be noted and supported and a report on funding issues be provided to a future meeting.

8 Members' Updates

There were no members updates.

9 Action Tracker

The Action Tracker was noted. Issues relating to the GP Federation and the planned Development Session had been discussed earlier in the meeting.

10 Forward Plan

Members agreed the Forward Plan subject to the following additions:

- Evaluation of Health outcomes from Fairer Start
- Ofsted Inspection of Children's Services at Stockton on Tees Borough Council