

Health & Wellbeing Board

A meeting of Health & Wellbeing Board was held on Wednesday, 22nd February, 2017.

Present: Cllr Jim Beall (SBC) (Chairman),

Cllr Mrs Ann McCoy (SBC), Cllr Sonia Bailey (SBC), Tony Beckwith (Healthwatch), Sarah Bowman-Abouna (SBC), Cllr Kevin Faulks (SBC) (substitute for Cllr David Harrington), Martin Gray (SBC), Saleem Hassan (CCG), Cllr Di Hewitt (SBC), David Brown (TEWV), Barry Coppinger (PCC), Sheila Lister (NHSE), Steve Rose (Catalyst) , Cllr Julia Whitehill (SBC) (substitute for Cllr Lynn Hall), Ali Wilson (CCG), Paul Williams (HaSH), Ann Workman (SBC)

Officers:

Also in attendance: Gary Wright (NTHFT), Tracie Jacobs (CCG), Ann Baxter (TSAB)

Apologies: Cllr David Harrington, Cllr Lynn Hall (SBC), Alan Foster (NTHFT),

1 **Declarations of Interest**

Paul Williams declared a personal interest in item 6 'Integrated Urgent Care' as the organisation he represented, Hartlepool and Stockton Health, had entered into an alliance agreement with other providers to deliver the Integrated Urgent Care Service fro 1 April 2017.

2 **Minutes of the meeting held on 25 January 2017**

The minutes of the meeting held on 25 January 2017 were confirmed as a correct record.

3 **Tees Wide Safeguarding Adults - Presentation**

Members received a presentation, by Ann Baxter, Independent Chair, relating to the Annual Report 2015 - 16 and Strategic Business Plan 2016 - 17 of the Tees-wide Safeguarding Adults Board (TSAB)

Members initially received an overview of the Annual Report and noted some of the operational challenges that had faced partner agencies during 2015/16, many of which continued. These included:

- providers leaving the nursing home market and residential homes leaving the sector.
- increases in Deprivation of Liberty Safeguards.
- increases in Domestic Abuse reporting to the Police.
- resource availability.

Members noted the strategic aims of the TSAB :

- Personalisation
- Prevention
- Protection

- Partnership
- Professional Accountability

These aims continued to guide the work of the TSAB and this was reflected in the objectives contained in the Strategic Business Plan 2016 - 17, details of which were provided to the Board.

Discussion included:

- the bulletins, published by the TSAB, were very accessible and readable and provided sufficient information to understand issues but also provided hyperlinks if reader's required more detail.
- the TSAB continued to forge links with Local Safeguarding Children Boards, recognising the importance of having a complete view of safeguarding.
- members considered the financial vulnerability of older people. The Police and Crime Commissioner explained that his office was hosting a training event that would deal with scam busting and he would provide details to members, via the Chair. Consideration would be given to adding a Trading Standards officer to the TSAB's membership given the rising number of scams targeted at vulnerable adults.
- there was a need to continue to raise awareness of signs of abuse with the community and those who were being abused. It was noted that the TSAB business unit would be happy to speak with groups and individuals to help communicate messages.
- meaningful engagement with the CQC had proved to be difficult.
- listening to the voice of the public was a priority for the TSAB this year. The Board was also keen to hear, and understand, local issues.
- the contribution of all partners at TSAB meetings was considered to be very good.

RESOLVED that the presentation and discussion be noted.

4 Health and Wellbeing Update

Members considered a report that presented the minutes of a number of meetings associated with the Health and Wellbeing structure:

- Adults Health and Wellbeing Partnership - 8 November 2016.
- Children and Young People Partnership - 18 January 2017
- Domestic Abuse Steering Group - 15 December 2017
- Adults' Health and Wellbeing Joint Commissioning Group - 20 December 2016
- Children and Young People's Health and Wellbeing Joint Commissioning Group - 4 January 2017

- Tees Valley Health and Wellbeing Board Chairs' Network - 23 February 2017

The report also presented some slight changes to membership of the Children's Health and Wellbeing Joint Commissioning Group and the two Partnerships.

RESOLVED that the minutes detailed above be noted and the amendments to memberships approved.

5 Integrated Urgent Care

Members received a report that updated the Board on initiatives that were being implemented to manage the demands on urgent and emergency care systems and how services were being developed to improve outcomes and experiences for patients.

It was explained that a new integrated urgent care service had been commissioned which would bring together a range of services such as GP out of hours, minor injuries and a walk-in centre.

Following the procurement process the service contract was awarded to North Tees and Hartlepool NHS Foundation Trust which would be working in partnership with North East Ambulance Services and Hartlepool and Stockton Health (GP Federation). The service would be delivered in two localities from 1 April 2017; University Hospital of Hartlepool and University Hospital of North Tees.

It was expected that the revised service would be:

- timely, highly responsive and would provide joined up care which was clinically safe, streamlined, integrated and sustainable.
- Responsive to patient needs.
- Improved patient experience.
- in the right place at the right time, allowing patients to be seen by the most appropriate health professional.

Discussion could be summarised as follows:

- the new service should provide clarity to members of the public and would be seamless.
- ambulance handover and discharge transport delays were not a particular problem at Hartlepool and North Tees NHS Foundation Trust.
- significant numbers of calls, on ambulance time, could produce pressures in the system and ways of managing this and reducing the pressure were regularly reviewed. For example, currently, the level of urgency of some calls was being assessed by senior clinicians and these clinicians were providing advice that negated the need for some ambulances to be dispatched.

- North East Ambulance Services' senior management had a clear focus on addressing issues and improving the service.

- it was agreed that the positive promotion of the new integrated service would be very helpful and it was explained that a suitable article was scheduled for the next Stockton News.

- the new service was part of the journey towards reshaping and integrating services.

RESOLVED that:

1. the report and discussion be noted.

2. that a progress report on the new service be presented to the Board in 6 months.

6 Joint Health and Wellbeing Strategy, Joint Strategic Needs Assessment and Tees Valley Public Health Shared Service

Members considered a report that provided:

- an update on the Joint Strategic Needs Assessment (JSNA) process for discussion.

- a proposed process for reviewing the Joint Health and Wellbeing Strategy (JHWS)

- an update on the changes resulting from the disestablishment of the Tees Valley Public Health Shared Service (TVPHSS)

Members noted that the process relating to updating the JSNA included a role for the Adults' and Children and Young People's Partnerships in terms of identifying leads to progress work on topics and develop data. The Partnerships would also be involved in quality control of topics and identifying links and synergies across topics.

The Board considered and agreed indicative timescales for the development of the Joint Health and Wellbeing Strategy. This included the establishment of a task and finish group, reporting to the Board, to lead on and coordinate the work of refreshing the JHWS. It was envisaged that the Strategy would be available for approval around April 2018.

It was noted that the Task and Finish Group would consult with young people.

There was a suggestion that the Police be added to the proposed membership of the group and it was agreed that this would be considered further, outside the meeting.

Members noted how some of the work, previously undertaken by the TVPHSS, would be carried out going forward. It was explained that Public Health teams, across the Tees Valley, would continue to collaborate on key public health issues.

It was recognised that most topics cut across the two Partnerships, and, therefore, there would need to be careful consideration of how they would be allocated.

It was important to achieve a level of consistency across the JSNA footprint to help organisations who used the JSNA.

During consideration of the paper reference was made to 'Health in all Policies' document which was published by the Local Government Association and the Association of Directors of Public Health. The Health in all Policies approach was around focusing on the social and economic determinants of health and wellbeing, which the Board had previously discussed. The document made proposals about how partners could address socio economic aspects, along with other issues such as the built environment, whilst still maintaining a focus on addressing key health behaviours like smoking, alcohol misuse etc. A three day event, relating to this had been provided by Durham University and it was suggested the University be requested to provide a bespoke session for the Board and other partners. The session would be used as a foundation for the strategy refresh, as it would provide valuable context, with local focus.

RESOLVED that

1. the proposals described in the report, relating to maintenance and development of the JSNA be approved.
- 2 a task and finish group be established to lead on, and coordinate the work of refreshing the JHWS.
3. a bespoke event, relating to Health in all Policies, be arranged for the Board and Partnerships

7 Sustainability and Transformation Plan

Members received a brief update around the Sustainability and Transformation Plan.

The update and discussion could be summarised as follows:

- A number of working groups and workstreams had been set up and work was progressing.
- The CCG would be developing a delivery model and NHS England staff would be supporting that delivery.
- the CCG continued to attend public meetings to answer questions, however, final proposals had not yet been developed.
- options had to have the necessary capital supporting them before any consultation could begin.
- the acute reconfiguration element of the plan was important but debate currently seemed to centre on this only and community services investment

needed a much greater profile.

RESOLVED that the update and discussion be noted

8 Members' Updates

Members provided the following updates:

- A Health and Wellbeing Voice Forum had been established in the voluntary sector.
- A 3P event around the Autism Disorder Syndrome Pathway, for Children, was taking place shortly. This would see the redesign of the whole pathway.
- investment by the CCG in Primary care would see an extra 100 hours of primary care access for patients in Stockton, every week.
- investment by CCG has allowed patients to access GPs by using a practice website. Patients using the service would receive a response by the end of the next working day and many would not need to see a GP.
- Healthwatch reported that, in other parts of the country, a number of Healthwatch had voiced concern at the way STPs were being dealt with. It was also reported that there was potentially access to the CQC through Healthwatch as the Chair of Healthwatch England was a member of the CQC Board.
- it was noted that Air Pollution would be placed on the Board's Forward Plan.

RESOLVED that the updates be noted.

9 Action Tracker

Members considered the Board's Action Tracker.

RESOLVED that the Action Tracker be noted.

10 Forward Plan

Members considered the Board's Forward Plan.

RESOLVED that the Forward Plan be noted.