

Committee and Date

Health and Wellbeing Board

4 March 2020

MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 12 NOVEMBER 2020 9.30 AM - 12.00 PM

Responsible Officer: Michelle Dulson

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Present

Councillor Lee Chapman (Co-Chair) PFH Organisational Transformation and Digital

Councillor Dean Carroll PFH for ASC and Public Health

Rachel Robinson Director of Public Health

Karen Bradshaw Director of Children's Services

Tanya Miles Interim Director of Adult Services
David Evans Accountable Officer Shropshire CCG

Dr Julian Povey Clinical Chair, Shropshire CCG (Co-Chair)
Jackie Jeffrey VCSA

Vanessa Barrett Shropshire Healthwatch

David Stout Interim CE, Shropshire Community Health Trust Zafar Igbal Associate Medical Director Public Health, MPFT

Ros Preen Shropshire Community Health Trust

Also in attendance:

Val Cross, Jill Robinson, Kate Garner, Patricia Blackstock, Penny Bason, Nicky Jacques, Berni Lee, Julia Baron.

92 Apologies for Absence and Substitutions

The following apologies were reported to the meeting by the Chair

Mark Brandreth, CEO, Robert Jones & Agnes Hunt Orthopedic Hospital NHS Foundation Trust

Stacey Keegan, Chief Nurse and Patient Safety Officer, Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

Louise Barnett, Chief Executive, Shrewsbury & Telford Hospital Trust

Megan Nurse, Midlands Partnership Foundation Trust

Laura Fisher, Service Manager – Housing and Occupational Therapy, Shropshire Council

Lynn Cawley, Chief Officer, Healthwatch Shropshire

Dr Julie Davies, Director of Performance and Delivery, Shropshire CCG

David Stout, CE, Shropshire Community Health Trust

Anne-Marie Speke, Healthy Child Programme Coordinator, Shropshire Council

The following substitutions were also notified:

Professor Zafar Iqbal – substitute for Megan Nurse, MPFT Vanessa Barrett – substitute for Lynn Cawley, Shropshire Healthwatch Ros Preen – substitute for David Stout, SCHT

93 Disclosable Pecuniary Interests

Members were reminded that they must not participate in the discussion or voting on any matter in which they had a Disclosable Pecuniary Interest and should leave the room prior to the commencement of the debate.

In relation to the Better Care Fund, Jackie Jeffrey declared that she worked for a voluntary sector contractor.

As a GP, Dr Julian Povey declared an interest in relation to the Healthy Weight Strategy, Covid-19 Update and Flu Immunisation Update.

94 Minutes of the last meeting

RESOLVED

That the minutes of the meeting held on 17 September 2020 be approved as a correct record.

95 Public Question Time

No public questions had been received.

96 System update

STP Update

The report of the STP Finance Director, Shropshire, Telford & Wrekin CCG was received – copy attached to the signed Minutes. The Accountable Officer / Integrated Care System Lead Director introduced and amplified the report and gave a short presentation updating the Board in relation to the six areas of the System Transformation Plan – copy of slides attached to the signed Minutes.

The Accountable Officer / Integrated Care Team Lead Director explained that the long-term plan, which had been developed in 2019 and although not yet formally signed off, it set a timeline for STPs to move towards Integrated Care Systems (ICS) bringing together providers and commissioners. He expanded on the role of the ICS and confirmed that they were currently entering an assurance process and were on track to become an ICS in April 2021. He informed the Board that an ICS Shadow Board had been established and had been meeting for some time and that the role of ICS Lead Director had been combined with that of the Accountable Officer role.

The Accountable Officer / Integrated Care Team Lead Director reported that the System Improvement Plan had been submitted to NHS England and Improvement,

the first six months of which was very much aligned to the Winter Plan. He then touched briefly on the second wave of Covid-19 and confirmed that the Silver System Command structure remained in place at a structural level following the first wave. All partners were very mindful that it was a fast-changing environment. He went on to discuss roll out of the vaccine post-Christmas and explained the groups that would be prioritised to receive it.

Looking briefly at winter planning, the Accountable Officer / Integrated Care Team Lead Director explained that the primary aim this winter was, wherever possible, to keep patients away from A&E and to use other services to look after them locally or at home. Finally, the Accountable Officer / Integrated Care Team Lead Director discussed Transformation and Service delivery across the system along with the workforce plan.

RESOLVED: To note the STP update.

Healthy Lives Update

The Health and Wellbeing Officer introduced and amplified her report – copy attached to the signed Minutes – which provided the Board with updates for 'Healthy Lives', the Partnership Prevention Programme of the Health and Wellbeing Board.

The Health and Wellbeing Officer reported that Social Prescribing was progressing well albeit in a different way due to Covid-19, with an increasing number of young people being referred. She informed the Board that Shropshire Social Prescribing had received national recognition having been cited in the Kings Fund Charity evaluation report earlier in the year.

The Health and Wellbeing Officer went on to report that the second stage of the LGA/Health Foundation bid had been submitted, the outcome of which was awaited. The updated governance structure had been included within the report for information.

Finally, the Health and Wellbeing Officer reported that the Healthy Lives Steering Group would re-commence in the New Year.

RESOLVED: To note and support the ongoing work.

97 Shropshire, Telford & Wrekin CCGs Winter Plan

The report of the Director of Planning, Shropshire, Telford & Wrekin Clinical Commissioning Groups was received – copy attached to the signed Minutes – which updated the Board on the Shropshire, Telford & Wrekin CCGs winter planning arrangements. The Accountable Officer introduced and amplified the report.

He reported that there had been some unusual considerations this year, not least Covid-19. He informed the Board that the increased range of the Flu Vaccination programme this year had impacted upon supply so not everyone had received their flu jab. Part of the challenge around that went back to the logistics of delivering the Covid-19 vaccination as there had to be a gap between receiving the two.

The Accountable Officer explained that they had tried to ensure this year that the system was default??? rather than individual organisations. They wanted it to be about the reorganisation of system priorities, recognising the challenges that they were also trying to restore services at the same time, but, making sure that they still had pan-organisational governance but that supported solutions and enabled rapid decision making. They also wanted to ensure that staff were deployed appropriately to support priorities and that changes were being embraced as they went through this. They also wanted to ensure that they learnt from what hadn't worked particularly well in previous years.

The Accountable Officer informed the Board that initially organisations were asked to come forward with schemes and there were more than 30 put forward across the range of system partners, a lot of which were looking at admissions avoidance and/or discharge. They then went through a process of narrowing those down before they got to a place where they had a range of schemes that were going to be taken forward and those included things like expansion of the rapid response service, into the Shrewsbury area particularly, looking at how therapy services could be used in a different way at the front door, and NHS111 etc.

The Chairman of Healthwatch Shropshire informed the Board that they were starting to research a new hot topic and starting to learn about the experiences of hospital patients and care home residents in respect of the visiting arrangements that had been made for family and friends when visiting in person had been so restricted. They were hoping to capture a lot of good practice that could be introduced more widely and could feed in to the work of the New Ways of Working Group.

RESOLVED: To note and support the contents of the report.

98 Adult Social Care Winter Plan

The Committee received the report of the Interim Director of Adult Social Care and Housing – copy attached to the signed Minutes – which highlighted the way in which Adult Social Care would deliver the 2020/21 Adult Social Care Winter Plan.

A presentation was given – copy of slides attached to the signed Minutes - that covered the following areas:

- Winter Plan
- Overarching work within the health and care system
- Preventing and controlling the spread of infection in care settings
- Collaboration across health and care settings
- Supporting people who receive social care, the workforce and carers
- Supporting the system

The Interim Director of Adult Social Care and Housing explained that Shropshire Council's Winter Plan set out what would be done over the winter period to address the priorities set out in the Government's Adult Social Care Winter Plan and had been split into a number of different themes. The Service Manager for Short Term Support and the Service Manager for Community Partnerships and Day Opportunities took the Board through the detail underneath these themes. The

Interim Director of Adult Social Care and Housing concluded by stating that Shropshire was in a strong position this winter and she expressed her thanks to everyone for all of the work being done to support people in Shropshire.

The STP Programme Manager / Covid Community Response Lead informed the Board that one part of the Winter Plan, the wellbeing contract, had received a funding uplift and it was hoped that closer working in this area could possibly be undertaken with the primary care network and other partners going forward in order to make the best use of the service.

The Chief Officer, Shropshire Partners in Care welcomed the Council's support but expressed caution around capacity in the market and the financial challenges posed as many care homes had been hit by a fall in occupancy levels.

The Portfolio Holder for Adult Social Care thanked the whole Adult Social Care sector for all of the work being undertaken during the most challenging and difficult times ever known and he encouraged everyone to read the full report.

RESOLVED: To accept and endorse Shropshire Councils Adult Social Care Winter Plan.

99 HWBB priorities: Healthy Weight Strategy

The report of the Consultant in Public Health was received – copy attached to the signed Minutes – which updated Board Members on progress with development of Shropshire's Weight Management Strategy and sought the support of Board Members in progressing the plans. The Consultant in Public Health amplified her report and gave a presentation – copy of slides attached to the signed Minutes. The presentation covered the following areas:

- Context
- Excess Weight statistics
- Adult Obesity
- Inequality in Excess Weight
- Weight Management Strategy
- Engagement and Next Steps

The Consultant in Public Health reported that obesity was an extremely complex and growing problem and was a priority for both the STP and this Board. She took Members through the data for Shropshire and compared it to the national data for England and the West Midlands populations. She also looked at inequalities whereby those from more deprived backgrounds were more prone to obesity

The Consultant in Public Health explained that a Weight Management Strategy using a whole system approach to obesity was required and suggestions for how this might be achieved had been set out in the report.

Jackie Jeffrey, VCSA commented that food poverty was not just about healthy choice as an easy choice, it was about understanding nutrition and understanding how people on low incomes or in temporary housing cannot feed themselves healthily because they don't have the facilities. It also highlighted how council tax support also impacted on people's ability to eat healthily and afford nutritious food. She

stressed that it was a complex and nuanced situation and was important that any multi-agency working tied in with the work of the Social Task Force which she also sat on, because they were recommending the same things.

The Consultant in Public Health agreed and explained that from the outset of this work one of the first contacts she made was with Emily Fay from the Food Poverty Alliance and would be working hand in glove with her moving forward. The Chairman explained that he also chaired the Covid Social Task Force and could refer her through to it, if appropriate.

Zafar Iqbal, Associate Medical Director, MPFT informed the Board that his background was in Public Health so he was really pleased to see this paper and fully supported the prevention agenda and agreed that intervening early was the correct way to go. He explained that in relation to supporting adults, the numbers were so large in terms of number of adults who were obese that it would be virtually impossible to offer support to adults to lose weight sufficiently however, he felt that it was worth providing intensive support for those patients who were at very high risk, eg existing cardiovascular disease or diabetes etc, and the other group, who were generally missed out as being high risk, those people with mental illness, especially those with severe mental illness who had very poor life expectancy.

The Associate Medical Director, MPFT informed the Board that a review had recently been undertaken of the effectiveness of digital apps for improving healthy lifestyles, which had been found to be getting a lot better as time went by and which he felt might be worth looking at for the general population who were keen to lose weight.

RESOLVED:

- To endorse the approach to the review as described in the report;
- To support the 'next steps' as described in paragraph 3.9 of the report;
- To advise on approaches to adopt in ensuring the 'critical success' factors identified in paragraph 3.5 could best be achieved; and
- To note that amongst the wider risks and opportunities specified, there was a potential for delay in strategy development contingent on the COVID crisis.

100 Harnessing COVID-19 support across Shropshire

The report of the CEO, Shropshire Rural Communities Charity (RCC) was received – copy attached to the signed Minutes – which set out the responses received following a survey in July/August to capture the extent of the Covid-19 community activity and to understand the development needs of those groups going forward. The CEO amplified her report. She informed the Board that, based on their initial findings, Shropshire RCC had secured a small amount of lottery funding to provide extra support to those groups that required it until the end of March 2021.

She explained that although there had been a huge amount of generosity, it was imperative that the work generated be harnessed and consolidated to ensure it was not lost going forward and she drew attention to paragraph 2 of the report which set out four areas that would help ensure the continuation of those groups and which encompassed things like the need to develop organically rather than be directed by statutory bodies, being able to operate safely including mechanisms for undertaking

DBS checks and for handling people's money etc and the need for grant funding to assist with direct costs and to pay for ongoing adviser support. She also drew attention to 'volunteer fatique'.

The Chairman thanked the CEO for her very interesting paper and commented on the importance of understanding not only the sustainability of those groups, but also any work which assisted supporting the resilience of the community and voluntary sector was really vital. He informed the Board that the Covid Social Task Force had set up a Task and Finish Group looking very specifically at the community and voluntary sector infrastructure and how partner organisations, including the council, could support and understand how best to build on and strengthen that infrastructure.

A brief discussion ensued in relation to some of the local work being undertaken along with the challenges being faced by these organisation that may prevent them from remaining sustainable.

RESOLVED: to note the contents of the report.

101 Covid-19 update and Flu Immunisations update

The report of the Director of Public Health was received – copy attached to the signed Minutes – which provided the Board with an update on Covid-19 and Flu immunisations including national targets, the communications campaign to raise awareness of eligibility and increase uptake, actions to reach eligible groups who may experience inequalities in getting a flu vaccination and progress with the flu vaccination programme.

The Director of Public Health updated the Board with the latest figures for Covid-19 from the previous week. She confirmed that the figures were updated daily and were likely to increase before the impact of the lockdown was seen and it would be several weeks before the rates of hospital admissions and deaths began to reduce. She explained that during the first wave the majority of cases in Shropshire were seen in hospital/care home settings and other workplace settings whereas the majority of the cases now were within households and the community and every ward in Shropshire in the last seven days have had cases in them.

The Director of Public Health explained that there was a lot of work being undertaken as we go towards winter and she drew attention to the availability and capacity of testing in the County and that combined with the roll out of the vaccine, the other thing that would help us move forward over the next few months were the contact tracing, and people complying with isolation and other guidelines, the so called 'swiss cheese' approach. She also highlighted the communications work being undertaken including the Step Up Shropshire campaign, the work of the Community Reassurance Teams and the Covid Hotline (03456 789028). There had also been a lot of promotion around supporting people's mental health especially as we go into winter particularly.

Turning to the flu vaccine, the Director of Public Health reported that this year they had a target to get 75% of those people in the eligible groups vaccinated and that compared to the same time in the previous year the figures had increased eg the

number of people in the over 65's group to have received a vaccine had increased from 51% to 64%.

The Portfolio Holder for Adult Social Care and Public Health paid tribute to the Director of Public Health and all of the public health teams and officers who had been seconded across from other departments and the people of partner agencies for everything they had been doing during the course of the pandemic which was nothing short of superb.

RESOLVED: To note the contents of the report and to promote the flu vaccination to eligible groups and staff with their service.

102 Chairman's Updates

The Chairman reported that he had received four items of correspondence – copies attached to the signed Minutes. Three from NHS England (Primary Care Support England) as follows:

A Letter/memo dated 5 October 2020 had been received stating that with effect from 28 September 2020 the pharmacy at Roushill, Shrewsbury, SY1 1PQ run by J K Lunt Limited had relocated to The Tannery, Barker Street, Shrewsbury, SY1 1QJ and was now operated by Lunts Healthcare Ltd. The pharmaceutical list for the area of Shropshire Health and Wellbeing Board would be amended with effect from that date.

Letters dated 3 November 2020 and 5 November 2020 had also been received in relation to a change of ownership application, and confirmation that with effect from 4 November 2020 the pharmacy at High Street, Highley, Shropshire, WV16 6LP would be operated by Giles Evans Ltd and the pharmaceutical list for the area of Shropshire Health and Wellbeing Board would be amended with effect from that date.

The fourth item of correspondence was from The Royal British Legion and was a Loneliness and Social Isolation in the Armed Forces Community briefing for local authorities. The Legion were calling on local authorities to recognise the specific hazards of loneliness and social isolation among the Armed Forces community by including consideration of this group in their Joint Strategic Needs Assessments (JSNA) and Joint Health and Wellbeing Strategies (JHWS).

The Chairman reported that the Council had an Award-winning Armed Forces Covenant and had a specific Officer lead in relation to the Armed Forces Covenant work and so had contacted the officer leads. The Chairman informed the Board that this work would tie into a piece of work that the Armed Forces Covenant Team were embarking on relating to some new legislation that will be coming forward in relation to duties to be imposed on a number of statutory organisation in respect of armed forces personnel and he would report back to the Board as work was put into place.

Finally, the Chairman reminded members about an email they had received from Val Cross, relating to a free Solihull Approach 'Understanding Trauma' online course. As Trauma and Adverse Childhood Experiences had been identified as a priority for the Board, he encouraged all members to do this course if they had not already done so.

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The course was free to all professionals with a work-based postcode in Shropshire. Members were encouraged to share this information more widely with colleagues in their workplace/setting.

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Signed	(Chairman)
Date:	