



**Committee and Date**

Health and Wellbeing Board

15 June 2023

**MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 20 APRIL  
2023  
9.30AM – 12NOON**

**Responsible Officer:** Michelle Dulson

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**Present**

Kirstie Hurst-Knight – PFH Children & Education (Remote)  
Cecilia Motley – PFH Health (integrated Care System – ICS) & Communities (Co-Chair) (Remote)  
Rachel Robinson - Executive Director of Health, Wellbeing and Prevention  
Tanya Miles – Executive Director for People  
Laura Tyler – Assistant Director - Joint Commissioning  
Simon Whitehouse – ICB Chief Executive Officer, NHS Shropshire, Telford and Wrekin (Co-Chair)  
Claire Parker – Director of Partnerships  
Patricia Davies - Chief Executive, Shropshire Community Health Trust  
Nigel Lee - Interim Director of Strategy and Partnerships, Shrewsbury & Telford Hospital Trust  
Lynn Cawley - Chief Officer, Shropshire Healthwatch  
Jackie Jeffrey - VCSA  
David Crosby - Chief Officer, Shropshire Partners in Care  
Stuart Bills - Superintendent, West Mercia Police

**61 Apologies for Absence and Substitutions**

Patricia Davies, SCHAT  
Sara Ellis, RJA

**62 Disclosable Interests**

None received.

**63 Minutes of the previous meeting**

The Chair Summarised the follow up action and notes of highlight in the Minutes which included the following:

- The Executive Director for People had requested a report on the Oswestry Test and Learn site, which would set out the plan to roll this out across the County - this report was on the agenda for this meeting.
- A recommendation from the JCG/BCF paper that a further paper regarding risk around funding gaps for hospital discharge and social care placements be brought to a future Board meeting - this had been noted on the forward agenda plan.
- A recommendation from the Air Quality report that further reports would be presented to the Board as the project progressed - an update was scheduled to come to the June Board meeting.

- A recommendation from the Shropshire Drug and Alcohol Strategy to receive a further report on progress - this had been scheduled for the September meeting.
- Healthwatch Shropshire's Forward Plan for 2023/24 and aligning it with the priorities of the system - the Chief Officer requested that if anyone had any thoughts around some focussed work that they could undertake, to speak to her and she would take it to the Healthwatch Board to agree.
- Vaping and Children and Young People and the concerns of the Board - work was progressing well, with a Task and Finish group taking this work forward led by Public Health. A Briefing paper for schools and those who work with young people had been completed and would be circulated following final sign off. An update on this work would be provided at the June meeting.

It was noted that Lynn Cawley was in attendance in person at the previous meeting.

#### **RESOLVED:**

that the Minutes of the previous meeting held on 19 January 2023 be agreed and signed by the Chairman as a correct record, subject to the above.

#### **64 Public Question Time**

No public questions had been received by the deadline.

A public question had been received out of time for the previous meeting from David Sandbach.

The full question and the response provided by the Chairman was available from the web page for the meeting.

#### **65 Healthy Lives - Trauma Informed Approach**

The Board received the report of the Health and Wellbeing Strategic Manager – copy attached to the signed Minutes – which described what Adverse Childhood Experiences and trauma were and the potential damaging effects on learning, behaviour and health throughout a person's life and explained, as a system, what could be done about it.

The Health and Wellbeing Strategic Manager introduced and amplified the report. She also gave a presentation – copy of slides attached to the signed Minutes – which touched on the kinds of experiences that were adverse, the physical effect on people's bodies including higher healthcare use and the effects on Mental Health etc, examples of national practice, trauma informed connection to local plans, trauma informed approach, what was already happening in Scotland / Wales / Shropshire, Telford & Wrekin.

The Health and Wellbeing Strategic Manager drew attention to the film 'Resilience - the Biology of Stress and the Science of Hope' and the facilitated workshops that had been held along with the feedback received from staff. She went on to highlight the next steps which had been agreed by the Trauma Informed Steering Group.

The Portfolio Holder for Children and Education, who chaired the Multi-Agency Trauma Informed Steering Group, informed the meeting that, as a veteran herself, she was shocked that the brain activity of a child that had experienced this trauma was the same as a soldier that had experienced severe PTSD. She thanked the Health and Wellbeing Strategic Manager for her driving force and commitment in getting to this stage so that in every area of work people were aware of, and understood, how trauma could affect children. She was excited by the level of training and the offer which would benefit residents and families of Shropshire. The Board echoed these sentiments.

In response to a query, the Health and Wellbeing Strategic Manager explained the next steps in terms of staff training for 2023/24. She reported that the film and workshops would continue to be shown as an introduction to Adverse Childhood experience. It was hoped to have a training offer in place once this had been costed out, to include an in-house online resource to be used as part of induction training and/or as part of annual training. She explained that more work was required to ensure commitment throughout the system from senior management.

A brief discussion ensued and the Head of Service – Joint Partnerships stressed the importance of having a trauma package specifically for staff who see a lot of trauma, to enable them to be supported, as well as knowing how to support other people in this way. However, the system was not quite there with this.

The Chair reported that this item had been presented to the ICB meeting and it had generated a significant amount of conversation and he felt that a piece on residents' stories should be presented at the start of every ICB meeting and he committed to doing so.

In response to a query, the Health and Wellbeing Strategic Manager confirmed that an 'all-age' approach was being taken by Shropshire, including Telford & Wrekin, so it was a whole-system approach.

It was requested that this item come back to the HWBB with a really clear resource plan and commitment from partners about how to resource this going forward.

**RESOLVED:**

- to support a recommendation to make Board Members' workforces Trauma Informed in principle
- to focus on Early Years and Primary Education; working with partners to develop support for a 'Miss Kendra' approach in early years and primary school, where children feel valued and safe
- to produce a simple resource, that provides 'how to' information for different parts of the system (Public Sector, Voluntary sector, all services) with key trauma informed messages and tips
- to continue to work to develop a consistent training offer for the system (including evidence of implementation) which consists of:
  - Induction Tier - mandatory online training module developed as soon as possible, available to all across the Integrated Care System (ICS)
  - Awareness and Universal tier (Practitioner level)

- Advanced and specialist tier (Train the trainer) Delivering the practitioner level for sustainability
- to work with system leadership and commissioners to determine how to embed trauma approaches in commissioning and service delivery.
- to bring back to the HWBB a proposal in terms of next steps and how this gets developed and the commitment required.
- to present residents' stories at the start of each ICB meeting.

## 66 Dentistry - briefing paper

The Board received the report of the Senior Commissioning Manager, NHS England - Midlands and the Consultant in Dental Public Health, NHS England – Midlands – copy attached to the signed Minutes – which provided an overview and scope of existing NHS Primary Care dental services in Shropshire.

The Senior Commissioning Manager and the Consultant in Dental Public Health introduced and amplified the report. The Senior Commissioning Manager highlighted the challenges due to covid and what had been done to mitigate this and to get better access for patients. The report set out the dental services that were available in Shropshire both primary care and secondary care provision and also set out examples of treatment for each treatment band and how many UDA's (Unit of Dental Activity) that equated to, with a full-time experienced dentist expected to deliver around 7,000 per annum.

The Senior Commissioning Manager explained that during Covid there was a period where all dentistry was suspended due to infection control issues and social distancing, which led to the set up of urgent Dental Centres so that strategically urgent dental treatment could be delivered for patients. He went on to explain how incrementally they had increased the delivery that dental practices should be providing (20% from 8 June 2020 to 31 December 2020 back up to 100% on 1 July 2022). This had however led to a backlog which was why patients were now struggling to get access to a dental practice.

Prior to the pandemic, approximately 55.7% of the population of Shropshire, Telford & Wrekin accessed NHS dentistry and although now on the increase, had fallen to 48.3%. The report set out how services were getting back into recovery and highlighted several initiatives that had been implemented to help restore dental access to pre-pandemic levels and the Senior Commissioning Manager drew attention, in particular, to the dental advice line and the new NHS practice in Oswestry. Finally, he highlighted the current challenges which were around the workforce and in particular recruitment and retention.

The Consultant in Dental Public Health reported that although the population of Shropshire in general had good oral health, this was not the case in the more deprived communities and the Oral Health Network were focussing interventions on those communities to reduce inequalities.

A brief discussion ensued and the Senior Commissioning Manager and the Consultant in Dental Public Health answered a number of queries from members of the Board. Lynn Cawley, Healthwatch Shropshire informed the Board that she had

shared the Healthwatch report published in September 2021 with the Senior Commissioning Manager which had identified the limits of access to NHS Dentistry, particularly in Oswestry and Market Drayton and that Healthwatch had been pleased to assist in the re-procurement of the new practice in Oswestry. She highlighted issues around the accuracy of the NHS England website.

The Senior Commissioning Manager shared the frustrations around the 'Find a Dentist' service on the NHS Website especially as services started to struggle to deliver services due to covid and were unable to accept new patients, however, this was slowly starting to open up again and the dental advice line were in constant contact with local practices and when they had the ability to take new patients they were letting the advice line know who in turn could signpost patients to the local practices.

The Assistant Director – Integration & Healthy People highlighted the work around young children and work within communities to ensure people had access to toothbrushes and toothpaste in order to develop really positive habits from an early age because one of the leading reasons why children were not in school and were in hospital was due to dental decay. She also drew attention to the work of the RESET team working within the Ark focussing on the homeless and those with substance misuse issues and felt that there was an opportunity to join up this work. In response, the Consultant in Dental Public Health reported that the local authority had been allocated £40,000 from NHS England to purchase toothbrushes and toothpaste which would be freely available and would be promoted through a range of avenues.

Concern was raised around the difficulty in finding a dentist in rural areas particularly for elderly patients if it involved having to travel to market towns as public transport was very sparse and a query was raised as to whether they could be co-located in GP surgeries. In response, it was explained that there was a difference in the way in which rent was reimbursed for GP and dental practices, which was a barrier for dental practices however they could open a branch site in rural areas.

A brief discussion ensued in relation to support for those on a low income and how to raise awareness of this. The Senior Commissioning Manager explained that dental practices should know how to direct patients as to whether they were exempt from payment or not and the dental advice line would also know how this worked however, more could be done to promote and support this. In response to support around promoting the dental health line, the Senior Commissioning Manager stated that any assistance would be greatly appreciated.

#### **RESOLVED:**

- To note the contents of the report;
- To consider how best to use the HWBB and its work around inequalities to look at the rurality challenge of dentistry along with how to ensure the commissioning of dentistry for the population and how to bring added value;
- To consider a more co-ordinated approach to communications in order to promote dentistry, the telephone helpline and other support;
- To consider the future of NHS dentistry in terms of rurality, recruitment and retention and increased access.

## 67 **Early Intervention/Prevention across Shropshire: Test and Learn site, Oswestry**

The Board received the report of the CYP Integration Lead, Shropshire Council – copy attached to the signed Minutes – which provided an update on early Intervention and Prevention across Shropshire and described the integration test and learn site at Oswestry, one of several projects in development alongside the draft All-Age Early Intervention and Prevention Strategy.

The CYP Integration Lead introduced and amplified her report. She gave some strategic background before going on to discuss the Test and Learn site in Oswestry. The Test and Learn site had focussed mainly on children, young people and their families with the aim of building the community-led offer and to identify and encourage children and families to tackle issues early on to prevent them from reaching a crisis point.

Oswestry was chosen as the first site using Population Health data which recognised that there were areas of deprivation in Oswestry and the work had been in two parts, first creating a multi-disciplinary team and secondly the development of a community led offer. It was noted that many of the practitioners included in the multi-disciplinary team did not know each other despite working with the same families, so one of the aims was to do joint visits which made a huge difference to the families. All practitioners were being trained to use the same system (liquid logic) which allowed them to see that holistic whole view of the family.

The CYP Integration Lead drew attention to the Community Collaborative which supported practitioners by filling in gaps that were being identified within the community and gave the example of OsNosh which was an initiative around food waste and was on a pay-what-you-can basis. So when practitioners meet families who were known to be in particularly difficult circumstances they would meet them at OsNosh and would eat with them whilst they had their meeting which has had a very positive impact for those families. Although not a new approach, best practice was being followed and built upon.

She highlighted the aims of the integration programme and explained that it was about reducing demand across the system of health, the Council and other partners. The work being done was currently being independently evaluated to evidence the results however it was felt that it was having a positive impact and she agreed to bring the results back to a future meeting. The next phase would be to roll out this approach across the County where it was hoped to have five integrated teams, the next site being North Shrewsbury followed by Ludlow and Market Drayton. She confirmed that this work was feeding into the All-Age Early Intervention and Prevention Strategy and conversations were being held around a leadership structure and how it would be delivered.

The CYP Integration Lead answered a number of queries from Board members. In response to a query about the creation of a prevention offer led by the VCSA, it was explained that they recognised the importance of the VCSA and the work they were doing to assist. There was also a crossover between the Community Connector

Network and the Community Collaborative and more work was needed across that contract to see how to make best use of resources across both of those. It was agreed to hold a conversation around this outside of the meeting.

**RESOLVED:**

To note the contents of the report including the further development and scaling up of the Integration programme

That a further report on the progress of the Integration Test and Learn sites be brought to a future meeting to endorse a proposed roll out plan for Shropshire

That strategic oversight of the Integration Programme be monitored by the HWBB for assurance.

To receive a report to a future meeting on the Draft All Age Early Intervention Prevention Strategy.

**68 Healthwatch report - Calling for an ambulance in an emergency**

The Board received the report of the Chief Officer, Shropshire Healthwatch – copy attached to the signed Minutes – which set out patient experiences when calling for an ambulance in an emergency. The Chief Officer thanked the Board for the opportunity to bring this report before them and she also thanked all the people who shared their experiences. She gave a presentation (copy of slides attached to the signed Minutes) which covered the following areas:

- What we did and why
- Who we heard from
- Where they lived
- Themes of experiences
- Positive comments
- Sample negative comments
- Response from and Actions Taken by the ICS
- Response from Healthwatch England

The Chief Officer informed the Board what they did and why, how it was promoted, and the number of responses received. Of the 168 responses received, 103 of those experiences happened between October 2021 and September 2022. She reported that there was a large degree of positive feedback, particularly around staffing and the paramedics along with some very strong and powerful negative experiences, particularly where the loss of a loved one had been as a result of some delay across the system, and she gave some examples.

She was aware of the amount of work being undertaken within the ICS to try to address these challenges and had heard from the Chief Medical Officer about the complexity of the situation and the impact it was having on primary, community, secondary and social care and how as a system everyone was working together to try to resolve those challenges.

Going forward, in relation to Shropshire Community Health Trust, the Chief Officer stated that they would like to be involved in any work around getting feedback on the virtual wards, work being done to support care homes and people with mental health challenges, and she described the three pillars of improvement work currently being focussed upon by the ICS. Finally, she described the conversation that had since happened as a result of the report.

The Chair thanked the Chief Officer for the report and the work that had gone into it and recognised the work that was taking place to improve the issues. It was felt that the information contained within the report was vital and a brief discussion ensued around the issues raised.

The Head of Service – Joint Partnerships expanded on the point made around the falls pathway and the direct action as a result of the report being presented to a ShIPP meeting which was really positive and when some funding was received to deal with falls the system was ready to go with it and also addressed prevention of falls.

It was agreed to invite the Fire Service to future meetings so that they could become a part of the conversation.

The Executive Director of Health, Wellbeing and Prevention highlighted the work being done by Members through both the Health Overview and Scrutiny Committee and the Joint Health Overview and Scrutiny Committee whereby a task and finish group had been set up to look at some of these issues and some really important findings had come out of the group which would be helpful for the Board to look at.

The Chief Officer thanked the Board for their comments which would be included in the Annual Report of Shropshire Healthwatch and she commented that they had been very much supported by WMAS with this piece of work and she felt there was a piece of work to be done around communications and highlighting the availability of ambulances and that if you call one, you will get one.

**RESOLVED:**

- to note the content of the report;
- to note the responses from the providers and to give their support in holding system partners to account for the work they are doing to address the issue of ambulance delays and its impact.

**69 ICS Joint Forward Plan update**

The Board received the report of the Director of Partnerships, Shropshire, Telford and Wrekin ICB – copy attached to the signed Minutes – which updated the Board on progress with the Joint Forward Plan and engagement on the plan including next steps.

**RESOLVED:**



To note the contents of the report.

**70 Shropshire Integrated Place Partnership (ShIPP) Update including Better Care Fund (BCF)**

The Board received the report of the Head of Joint Partnerships and the Assistant Director, Joint Commissioning – copy attached to the signed Minutes – which presented an overview of the ShIPP Board meetings held in February and March 2023 and included actions, for assurance purposes, along with details of the Better Care Fund planning process.

The Head of Joint Partnerships introduced the report and highlighted the salient points. She explained that delegated authority was being sought for the Executive Director of People, Shropshire Council and the Director of Delivery and Transformation, ICB to sign off the 2022/23 End of Year return.

The Assistant Director, Joint Commissioning reported that they were currently reviewing the last year's plan and that the next two-year plan needed quite a lot of changes and that there may be some other schemes that would fit better within the plan and those conversations were yet to be had.

A brief discussion ensued and the Interim Director of Strategy and Partnerships, SaTH, felt that some of the work that had been done by SaTH could be combined with the work that was currently being done in this area and he agreed to share it with the Assistant Director, Joint Commissioning.

The Chief Executive SCHAT agreed that it was the right time to review the Better Care Fund to ensure it was aligned to the priorities and focused on prevention and supporting population health and keeping people well and out of hospital but it was important that the 'where' and the 'how' that work was going to be done was known so it was open and transparent and could be signed off in the full knowledge that everybody was supportive and had inputted into it. She went on to recognise the importance for both health and social care of the core services that were supported in terms of the funding around that and therefore needed to understand the implications of any changes and how those core services were contributing to the overall benefit in the system to ensure that it met the objectives of the Board and the overall ICS priorities.

In conclusion, the Executive Director for People reassured the Board that there was a system-wide working group across the system for the last six months with representatives from SCHAT, SaTH, the ICB and the Local Authority just thinking about what that review needed to look like so there was a great understanding of the current Better Care Fund and what it was delivering but also an idea about what they wanted the next two years to deliver. She asked all system partners to ensure that those people understood the timeliness now of getting the submission in and to please commit to the meetings that would be scheduled in order to work at pace as the dates were not changeable. The Chair added that it was important to ensure that the right people were in those conversations.

**RESOLVED:**

1. to recognise the work underway to address the key priorities of ShlPP, as well as the risks in the system, highlighted by the Board.
2. to note the Better Care Fund (BCF) planning guidance and to delegate sign off of the BCF plan to the Executive Director of People, Shropshire Council, and the Executive Director, Integrated Care Board. The detailed plan to be presented to the July Health and Wellbeing Board for ratification, subject to ratification by the Chief Executives’.
3. to delegate sign off for the 2022/23 End of Year return to the Executive Director of People, Shropshire Council, and Director of Delivery & Transformation, Integrated Care Board.

#### **71 Shropshire Family Carers update - All age carer strategy and updates**

The Board received the report of the Shropshire Carers Manager and Carer Lead – copy attached to the signed Minutes – which provided an update on the All-Age carer strategy.

##### **RESOLVED:**

To note the contents of the report and to support the All-Age Carer Strategy, recognising that carers were integral to any planning of services.

#### **72 Joint Strategic Needs Assessment - Drug and Alcohol**

The Board received the report of the Director of Public Health and the Public Health Intelligence Manager – copy attached to the signed Minutes – which provided an update on the Joint Strategic Needs Assessment for Drugs and Alcohol.

##### **RESOLVED:**

To note the contents of the report and to approve the recommendations contained therein.

#### **73 Health Protection update**

The Board received the report of the Consultant in Public Health – copy attached to the signed Minutes – which provided an overview of the health protection status of the population of Shropshire along with the status of communicable, waterborne and foodborne diseases.

##### **RESOLVED:**

To note the contents of the report.

#### **74 Armed Forces Covenant**

The Board received the report of the Armed Forces Covenant Lead – copy attached to the signed Minutes – which provided an update on the Armed Forces Covenant in Shropshire.

**RESOLVED:**

To note the contents of the report and to acknowledge the hard work that was ongoing for the veterans and serving members of the armed forces within Shropshire.

**75 Chair's Updates**

The Chair updated the Board as follows:

Correspondence from NHS England

Notifications had been received from NHS England about changes of pharmacy operator and ownership:

- Hills Pharmacy in Church Stretton was now operated by Gill & Nagra Ltd
- Lloyds Pharmacy in Ludlow, Shropshire was now owned by Gill & Nagra Ltd

And supplementary opening hours:

- Murrays Healthcare, Market Drayton from 40 to 49.15 hours per week
- Boots Pharmacy, Mytton Oak Road, supplementary opening hours from 40 to 44 hours per week.

A summary would be placed on the Council website.

Director of Public Health's Annual Report

The Director of Public Health's Annual Report was currently being drafted and would be brought to either the June or September Board meeting.

The Prevention Board will cease to be a separate Board, as its work was included under the Health and Wellbeing Board's Health Protection update.

Health and Wellbeing Board/ShIPP workshop

Members were reminded that this would be taking place on Monday 19 June from 10am-12noon in person. A hold the date invite had been sent to all members.

The Chairman informed the meeting that it was the Health and Wellbeing Strategic Manager's last meeting and he thanked her on behalf of the Board for the energy that she brought to the HWBB and for all the work she did behind the scenes, and they wished her a long and happy retirement.

<TRAILER\_SECTION>

Signed ..... (Chair)

Date: