



Committee and Date
Health and Wellbeing Board
7 March 2019

**MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON
17 JANUARY 2019
9.30AM – 11.55AM**

Responsible Officer: Michelle Dulson
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Present

Councillor Lee Chapman (Co-Chairman)	PFH Health and Adult Social Care
Councillor Nicholas Bardsley	PFH Children's Services and Education
Councillor Lezley Picton	PFH Culture and Leisure
Professor Rod Thomson	Director of Public Health
Andy Begley	Director of Adult Services
Karen Bradshaw	Director of Children Services
Dr Julian Povey (Co-Chairman)	Clinical Chair, Shropshire CCG
Dr Julie Davies	Director of Performance and Delivery, Shropshire CCG
Lynn Cawley	Shropshire Healthwatch
Heather Osborne	VCSA
Cathy Riley	South Staffordshire & Shropshire Foundation Trust
Ros Preen	Shropshire Community Health Trust

Also in attendance:

Val Cross, Penny Bason, Phil Evans, Ann-Marie Speke, Laura Fisher, Gail Fortes-Mayer, Tanya Miles, Clive Wright, Steve Trenchard, Pam Schreier, Barrie Reis-Seymour, Emily Fay, Councillor Gerald Dakin, Councillor Madge Shingleton, Councillor Karen Calder.

50 Apologies for Absence and Substitutions

The following apologies were reported to the meeting by the Chair

Dr Simon Freeman	Accountable Officer, Shropshire CCG
Jackie Jeffrey	VCSA
Neil Carr	Chief Executive, South Staffordshire and Shropshire Foundation Trust
Paul Bennett	Business Board Chair
Peter Loose	Chairman, Shropshire Partners in Care
Neil Nisbet	Finance Director & Deputy CE SaTH NHS Trust
Lisa Wickes	Head of Out of Hospital Commissioning and Redesign
Jan Ditheridge	Chief Executive, Shropshire Community Health Trust

The following substitutions were also notified:

Heather Osborne substitute for Jackie Jeffrey, VCSA

Barrie Reis-Seymour substitute for Lisa Wickes, Out of Hospital Commissioning and Redesign

Ros Preen substituted for Jan Ditheridge, Shropshire Community Health Trust

Cathy Riley substituted for Neil Carr, Shropshire Community Health Trust

51 **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.

52 **Minutes**

It was noted that Tony Marriott was not in attendance at the meeting and that Dr Julian Povey was the Chairman of Shropshire CCG and not the Vice-Chairman as stated in Minute Number 39.

RESOLVED:

That the Minutes of the meeting held on 1 November 2018, be approved and signed by the Chairman as a correct record, subject to the above.

53 **Public Question Time**

No public questions had been received.

54 **System Update**

i. Shropshire Care Closer to Home

Barrie Reis-Seymour Programme Lead introduced and amplified the Shropshire Care Closer to Home update (copy attached to the signed Minutes). He confirmed that the Phase II Model for case management had been agreed by the Governing Body in August. It had been agreed to go ahead with the pilot demonstrator site despite lack of progress on the Alliance Agreement and expressions of interest had been requested by 25 January 2019.

The Programme Lead confirmed that a Communications and Engagement Working Group had been established and that each provider had a Lead Communications Officer who sat on this Group. He also confirmed that STP Digital support was now being received. The IT Task and Finish Group continued to look at data and IT infrastructure requirements including data sharing, information governance requirements and the development of a shared care plan.

The Programme Lead reported that the Phase III concept models had been designed and shared with the Programme Working Group for feedback by the end of January before engagement with wider stakeholders through a number of workshops. Feedback would be collated in April when the final proposed models would be appraised by the CCG.

The Chairman suggested that it would be helpful for elected Members to know when the workshops would be taking place in their areas and in response to a query, the Programme Lead confirmed that the Council's Communications Lead Officer did attend meetings of the Communications and Engagement Working Group.

The Programme Lead informed the Board that the JSNA software tool shared by Professor Rod Thomson had provided a wealth of information about the population which could be incorporated into the design allowing checks to be made in 5/10/15 years to ensure it was sustainable, fit for purpose and met the needs of the population. It was felt that the current care closer to home design was spot on with current needs. However, it was vital to develop the fifth stage of step up community beds, which required further work to identify changes required to ensure the service remained fit for purpose and was sustainable.

ii. The Sustainability and Transformation Plan for Shropshire, Telford & Wrekin

Phil Evans, STP Director introduced and amplified the STP Programme update (copy attached to the signed Minutes) which highlighted the NHS 10 Year Plan. The STP Director gave a short presentation (copy of slides attached to the signed Minutes) which covered the following areas:

- The NHS Long Term plan - what the future looks like;
- Timeline – what outputs were expected and by when;
- System approach;
- Quantitative diagnostic;
- Population Health Management Flatpack;
- Next steps for Shropshire, Telford and Wrekin STP;
- Performance and Transformation reporting requirements;
- Governance Structure.

In response to a query, the SPT Director reported that the STP was a complete refresh as the previous plan had no buy in. The engagement would be very broad with each organisation involved in writing their own part. Although the Long-Term Plan was a nice aspiration and backed up other work being done in Shropshire, it was felt that a degree of realism was required about what could be achieved within the constraints of the timescale. Members of the Board were concerned that the timescale did not give enough time to undertake a meaningful re-write whilst ensuring that a broader system approach was taken into account and that all of the work across Shropshire and Telford were aligned.

Concern was raised at the lack of engagement with this Board as it was felt that a plan could not be developed unless all key groups had the opportunity to feed into and agree it. The STP Director confirmed that the intention was for all key groups to sign off on the plan.

iii. Future Fit

The STP Director introduced and amplified the Future Fit update and gave a short presentation (copy of slides attached to the signed Minutes) which covered the following areas:

- Summary of consultation results;
- Reflections on consultation response rate;
- Summary of responses and key themes;

- Developing the Decision-Making Business Case;
- To date and next steps;
- Considerations, recommendations and mitigations;
- Meeting of the Joint Committee to consider the Decision-Making Business Case;
- Development of the Integrated Care Shadow Board

The STP Director confirmed that all documents and appendices would be available to the public via the website that day. In response to a query, the STP Director confirmed that public transport and planned care had been included in the consultation.

iv. Better Care Fund, Performance

Penny Bason, STP Programme Manager, introduced the Better Care Fund Performance update report (copy attached to the signed Minutes) which provided an update on the progress of the Better Care Fund (BCF) including current BCF performance (Appendix A) and Draft Q3 BCF return (Appendix B).

Gail Fortes Mayer reported that the BCF had moved forward a lot this year and that the majority of the national metrics had been met however the non-elective admissions target had not been met in Quarter 2 and was in danger of not being met in Quarter 3. The Quarter 3 return also highlighted performance against the 8 High Impact Changes, implementation of the Red Bag Scheme and the Annual Review of the BCF programme.

In relation to the non-elective target, it was reported that a number of things had contributed to the rise and that a dedicated piece of work was being done to understand this. Regular updates would be provided to the Board.

Finally, the STP Programme Manager informed the Board that the Integrated Community Services team had been named team of the year, Adult Services at a recent national event.

v. Healthy Lives

Val Cross, the Healthy Lives Coordinator introduced and amplified her report (copy attached to the signed Minutes) which provided the Board with an update on the Healthy Lives programme. She highlighted the activity taking place in four of the programme areas (Healthy Conversations/Make Every Contact Count (MECC) Plus, Musculoskeletal and Physical Activity, Diabetes and Cardio-Vascular Disease and Social Prescribing).

The Healthy Lives Coordinator drew attention to the three levels of Healthy Conversations/MECC Plus training which had been developed. She reported that 91 learners had received Level 1 and 2 training and that further training was booked for the following week.

Turning to Physical Activity, 308 referrals had been made to 'Elevate' so far of which 156 were self-referrals. The sessions were aimed at those aged 65+ and at risk of falling. It was reported that the Get Active Feel Good programme which provided support to people living with and in recovery from cancer in order to improve their health and wellbeing through physical activity was now open to GP referral.

The Healthy Lives Coordinator informed the Board that 8 pharmacies and 3 GP practices had been taking part in the AF pilot with 92 people having been screened so far in Shropshire pharmacies. She then touched on CVD and diabetes audits, which had been

completed in 4 GP practices. 340 social prescribing referrals had also been made with 12 GP practices now involved.

The Healthy Lives Coordinator reported that the Risk Register, Action Plan and metrics had been updated and reviewed. Finally, the opportunities for progression of the Healthy Lives programme were discussed. In conclusion, the Health Lives Coordinator reported that the programme was going well and was moving at pace. She informed the Board that the team had made it to the finals of the team of teams award.

RESOLVED: That the updates be noted.

55 **Shropshire Food Poverty Action Plan**

Emily Fay, the Food Poverty Alliance Co-ordinator, and Katie Anderson, Project Manager for Shrewsbury Food Hub introduced and amplified their report (copy attached to the signed Minutes) which set out the Shropshire Food Poverty Action Plan. It was explained that food poverty was a growing problem in Shropshire with an estimated 27,000 households being affected by changes in the benefits system. Research has shown that Shropshire Residents would lose approximately £102m per year which was an average of £550 per working age adult.

The Shropshire Food Poverty Alliance was formed in 2018 to tackle this issue and membership included Shropshire Council, the NHS, Foodbanks, Age UK, and Citizen's Advice Shropshire. The Alliance have developed a 12-point Action Plan in order to enhance support for people in crisis, to prevent food poverty and to increase awareness. The Alliance was seeking resources to continue co-ordination of this vital piece of work.

Attention was drawn to the research carried out in 2018 across the county to map current provision, identify gaps and potential solutions. The research involved a lot of participatory work, including workshops, online surveys, and interviews to find personal experiences. The key findings highlighted that food banks were consistently seeing more people come through their doors which had real implications for health across the County. The cost of food had risen by 28% whilst average wages rose by only 5%. It was highlighted that some schools really struggled with this issue with pupils attending school not having had breakfast, nor having sufficient food for lunch, parents not being able to afford to buy fruit and vegetables etc.

The Alliance was seeking support for the Action Plan and for the Board to consider the resources that may be available to support it. The Clinical Chair, Shropshire CCG informed the Board that the impact on Health and Wellbeing could not be played down and he confirmed that the CCG would be happy to work with the Food Poverty Alliance. The Director of Performance and Delivery would put them in touch with the relevant programme leads.

A brief discussion ensued in relation to volunteers and how they could be used flexibly eg the working population could be requested to provide evening and weekend cover. Assistance was offered by a number of officers/organisations who agreed to make contact outside of the meeting.

In response to a query about how engaged the supermarkets were, it was confirmed that food was collected from about 15 supermarkets in Shrewsbury and were distributed between about 50 community groups. However, it was restrictive in getting the community organised to

deliver food and that although surplus food was useful it was also random and only a small part of the solution.

In conclusion, the Chairman felt that the Alliance approach was to be applauded and particularly welcomed the initiative to improve cooking and nutrition skills especially in schools. The Chairman requested an update on how things were progressing in a few months' time.

56 **Shropshire All-Age Carers Strategy Update**

Val Cross, the Healthy Lives Coordinator introduced and amplified her report (copy attached to the signed Minutes) which provided the Board with an update on current progress of the Shropshire All-Age Carers Strategy and Action Plan. She confirmed that work continued on the five key priority areas as set out in paragraph 3 of the report.

The Healthy Lives Coordinator drew attention to the Young Carers Day taking place on 31 January 2019.

In conclusion, the Healthy Lives Coordinator reported that although there was a lot of really good work happening, there was also a lot more work to do.

RESOLVED:

That the contents of the update be noted.

57 **STP All-Age Mental Health Strategy update**

Steve Trenchard the Programme Director for Mental Health gave a presentation and updated the Board in relation to the STP All-Age Mental Health Strategy. He informed the Board that in order to ensure the best value from the service, he was asking colleagues and patient groups etc to set out what their ambitions were for access to mental health support. He therefore wished to ask the Board what its ambitions were and in getting to this ideal future he wished to find out the things that Members would most like to do to help them and their colleagues to achieve this goal.

Responses included the following:

- Good communications and an understanding of what needs were and the services already being delivered;
- To ensure professionals were well trained and informed;
- A shared ambition to understand roles and responsibilities, where gaps were and how to bridge those gaps;
- To work in an integrated way;
- The reduction of stigma;
- To ensure adequate resources applied to the greatest effect;
- To ensure a preventative approach was taken across all ages of life;
- To help people to understand the reality of mental wellbeing;

- To use techniques to prevent/mitigate dementia;
- For individuals with some form of mental health to be supported in the community;
- Timely access to the level of service required when required and that crisis intervention be available when needed;
- The right service at the right time and in the right place;
- A children's graduated model with a wide range of different interventions, not one suits all;
- Support to combat loneliness;
- Resources and support for the voluntary sector to tap into to ensure services were safe and could be supported for longer;
- A more holistic approach to prevention.

The Board welcomed the approach in terms of engagement and encouraged all organisations to engage in this. The Director of Adult Services championed this important area of work and he set an ambition for joint commissioning opportunities and an opportunity to do something in the short to medium term.

58 Healthwatch Shropshire update

Lynn Cawley, Chief Officer of Shropshire Healthwatch introduced and amplified her report (copy attached to the signed Minutes) which provided the Board with an update on the progress made to date on the Healthwatch Shropshire Forward Work Programme for 2018-19.

The Chief Officer drew attention to the key points and in particular the significant changes in officers and volunteer numbers. As well as their on-going activities, Healthwatch Shropshire had been asked to support Healthwatch England with two pieces of work being conducted across the country, one of which being long term plan maternity mental health.

Turning to the Forward Plan, the Chief Officer requested the views of the Health and Wellbeing Board on what the Forward Plan Programme for 2019-20 should look like. In response, the Director of Public Health felt a key area was to link in with the work being done around Care Closer to Home. The Clinical Chair, Shropshire CCG welcomed the work of Healthwatch Shropshire especially around the development of a primary care network.

Councillor Calder, Chairman of the Health Overview and Scrutiny Committee informed the Chief Officer that the future work programme of the Joint Health Overview and Scrutiny Committee included looking at Mental Health and she would be pleased to look at the intelligence gathered to inform where the focus should be.

The Chairman thanked the Chief Officer for her very clear report.

59 Housing

i. Winter Provision for Rough Sleepers in Shropshire

Laura Fisher, the Housing Services Manager introduced and amplified the report (copy attached to the signed Minutes) which provided information on Cold Weather Provision for rough sleepers in Shropshire.

It was confirmed that the annual rough sleeper count undertaken on 20 November 2018 identified 21 verified rough sleepers. The Cold Weather Provision, which offered accommodation to all current known rough sleepers and any that present during the winter, had been activated on 14 December 2018 and would be on-going until March 2019. The Housing Services Manager reported that half had taken up the offer.

For those that had refused, the offer would continue to be made along with an offer of Severe Weather Emergency Provision which was offered in conjunction with accommodation in The Ark. Three nights of Severe Weather Emergency Provision had been offered so far this winter. The Housing Service Manager confirmed that the Outreach service continued throughout the winter attending any reports of rough sleepers and she drew attention to Appendix A which set out how to report a rough sleeper.

In response to a query, the Housing Service Manager confirmed that the number of verified rough sleepers had increased from 13 last year to 21 this year.

RESOLVED:

That the contents of the report be noted.

ii. Reducing Health Inequalities of Homeless Families

The Housing Services Manager then introduced and amplified a report (copy attached to the signed Minutes) which provided information on the Homeless Families learning resource and toolkit. It was confirmed that across the country the number of homeless families with dependent children was increasing leading to an increase in the use of temporary accommodation including B&Bs.

It was explained that the self-study tool had been produced to enable the health sector to support homeless families and homeless young people to reduce their health inequalities and improve their wellbeing, using public health interventions. The toolkit also included more practical guidance about what other professionals could do to support homeless people.

The Housing Services Manager wished to raise awareness of the toolkit with the Health and Wellbeing Board and felt that it could be used to great effect in Shropshire. The toolkit was endorsed by the Board however concern was raised around the overall ability of Public Health to deliver all aspects of it due to significant pressures on the budget. The Director of Public Health informed the Board that public health were seeing a continued loss of funding with another cut having taken place just before Christmas.

RESOLVED:

That the contents of the guidance be noted and that it be determined whether it could be used in Shropshire to promote and improve better health outcomes for those individuals and families at risk of suffering from homelessness.

60 Any Other Business

In relation to the application to open a new pharmacy in Baschurch, discussed at the Health and Wellbeing Board meetings on 5 July 2018 and 1 November 2018, it was reported that the pharmaceutical company had submitted a further application stating unforeseen benefits. Councillor Bardsley informed the Board that the final consultation deadline was the end of January 2019.

The Chairman proposed that the Board write reaffirming its previous view that Baschurch remain a controlled locality which was supported.

In response to a query Councillor Bardsley reported that the unforeseen benefits included an extension of hours and that a number of premises had been identified. It was felt to be totally unrealistic and a very weak case.

<TRAILER_SECTION>

Signed (Chairman)

Date: