



<b><u>Committee and Date</u></b>
Health and Wellbeing Board
12 September 2019

**MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING  
HELD ON 23 MAY 2019 9.30AM – 11.55AM**

**Responsible Officer:** Michelle Dulson  
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**Present**

Councillor Lee Chapman (Co-Chair)	PFH Health and Adult Social Care
Councillor Dean Carroll	PFH ASC and Public Health
Councillor Ed Potter	PFH Children's Services
Mr David Stout	Accountable Officer, Shropshire CCG
Dr Julie Davies	Director of Performance and Delivery, Shropshire CCG
Rachel Robinson	Director of Public Health
Andy Begley	Director of Adult Services
Karen Bradshaw	Director of Children Service
Lynn Cawley	Shropshire Healthwatch
Heather Osborne	VCSA
Megan Nurse	Non-Executive Director Midlands Partnership NHS Foundation Trust
Peter Loose	Chairman, Shropshire Partners in Care (Chief Executive Bethphage)

Also in attendance:

Val Cross, Martin Harris, Chris Morris, Pam Schrier, Tanya Miles, Gail Fortes-Mayer, Penny Bason, Steve Trenchard, Lisa Wicks, Anne-Marie Speke, Jayne Randall.

**1 Election of Co-Chairs**

Councillor Lee Chapman and Dr Julian Povey were elected as co-chairs of the Board.

**2 Apologies for Absence and Substitutions**

The following apologies were reported to the meeting by the Chair

Ros Preen	Shropshire Community Health NHS Trust
Julian Povey	Clinical Chair, Shropshire CCG
Jackie Jeffrey	VSCA
Neil Nisbet	Finance Director and Deputy Chief Executive, SaTH

The following substitutions were also notified:

Heather Osborne substituted for Jackie Jeffrey.

### 3 **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.

### 4 **Minutes**

#### **RESOLVED:**

That the Minutes of the meeting held on 7 March 2019, be approved and signed by the Chairman as a correct record.

### 5 **Public Question Time**

No public questions were received.

### 6 **Maternity Transformation Plan**

Chris Morris, the Chief Nurse introduced and amplified the report of the Local Maternity System Programme Manager (copy attached to the signed Minutes) which detailed the activity taking place through the Local Maternity System to deliver the transformation set out in Better Births 2016, in order to improve the safety of maternity care and to improve choice and personalisation of maternity services.

The Chief Nurse confirmed that they were into the third year of a three-year national transformation plan. It was reported that a positive change had been seen for women and babies, including the lowest number of still births seen last year, which was slightly above trajectory but it was unclear whether this was a one year blip or as a result of the work being undertaken. Smoking was still a big issue, particularly in Telford and Wrekin, and was a key priority in Years two and three. Although a lot of effort had been put into smoking cessation in Year two, outcomes did not improve, so a lot of work is being undertaken this year in order to improve outcomes.

It was reported that £400k funding had been secured for this work. It was hoped that creative and innovative ways of improving outcomes would be identified and a number of stakeholder events would be held to that end. It was confirmed that Maternity Services in Shropshire had been commended at a national level for its work, including the 'Baby Buddy' app.

In response to a query the Chief Nurse gave an update on the review of Maternity Led Units. It was hoped that an 8-week consultation would begin in September looking at the future of the units.

**RESOLVED:** That the contents of the report be noted.

## 7 System Update

### i. Shropshire Care Closer to Home

Lisa Wicks, the Head of Out of Hospital Commissioning and Redesign introduced and amplified the Shropshire Care Closer to Home update (copy attached to the signed Minutes). She highlighted the three phases and confirmed that the proposed models were going before the Programme Board for endorsement later that day and she would update this Board at its next meeting.

Dr Julie Davies, Director of Performance and Delivery, Shropshire CCG expressed her thanks to Local Authority colleagues for their support for this programme. In response to a query, Lisa Wicks, confirmed that it was an holistic model and would be rolled out as all-age so the process should be seamless.

The Chairman commended the progress achieved by this programme.

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

a) Martin Harris, STP Director introduced and amplified the STP Programme update (copy attached to the signed Minutes) which provided an update on the STP in relation to the recently submitted NHSE & I System Operating Submission.

The STP Director acknowledged that the STP would be joined up going forward and it was hoped that a more architectural approach in the way in which the system worked would be taken going forward. This revised approach was welcomed by Board Members who hoped to see the changes implemented at pace.

The report set out what would be happening over the next 12 months, including engagement with the voluntary sector, all providers, commissioners and the Local Authority to ensure that the plan was aligned and would provide the best value and services across the county.

b) The Board received a briefing note (copy attached to the signed Minutes) informing the Board of the recent decision by Shropshire CCG and Telford and Wrekin CCG to create one single strategic commissioner across Shropshire, Telford and Wrekin along with a report providing an update on Public Health within Shropshire Council, following Council approval of the 2019/20 Budget and Financial Strategy (copy attached to the signed Minutes).

**RESOLVED:** That the updates be noted and that the ambition to redesign and co-produce a new model of public health delivery for Shropshire be endorsed.

### iii. Better Care Fund, Performance

Penny Bason, STP Programme Manager and Tanya Miles, Head of Adult Social Care Operations introduced and amplified the Better Care Fund Performance report (copy attached to the signed Minutes) which set out progress and development of the Fund for 2019/2020.

The STP Programme Manager drew attention to the Non-Elective Admissions Analysis paper set out at Appendix A to the report, which highlighted multi-faceted reasons why the target had not been met, including admissions from care homes.

It was confirmed that 'frailty at the front door' had kept Shropshire performing much better (7%) compared to Telford and Wrekin (27%).

Gail Fortes-Mayer, felt that the methodology may be flawed as they only looked at admissions for those aged over 65. The focus of the Better Care Fund should be to support Care Closer to Home and Community Teams to look at those repeat admissions and to support admission avoidance.

Turning to the 2019/2020 National Policy Framework, it was confirmed that the guidance had yet to be published but that a funding uplift from CCGs would be between 1.7% and 5.2%. The STP Programme Manager drew attention to the Statement of Intent set out in Appendix C of the report which would strengthen integrated work across health and care and add context to the Section 75 Partnership Agreement. She then highlighted the key areas for development going forward.

A brief discussion ensued in relation to Non-elective admissions.

#### iv. Healthy Lives

Val Cross, the Health and Wellbeing Officer gave a presentation (copy attached to the signed Minutes) which provided the Board with an update on the Healthy Lives programme. The Health and Wellbeing Officer highlighted the following areas:

- Physical activity
- Social Prescribing
- Shropshire Food Poverty Alliance
- Healthy Lives Risk Register
- Patient Activation Measure (PAM) workshop.

It was felt that the response to elevate was really positive but that some alternative forms of funding should be sought. The Accountable Officer, Shropshire CCG informed the Board that funding would be available through the Primary Care Networks for Social Prescribing. In response to comments about mental health training for staff, the Chairman drew attention to the 'Rosemary and Thyme' joint training programme.

Turning to the Food Poverty Alliance, concern was raised as to how to increase uptake of the Healthy Start vouchers.

**RESOLVED:** That the contents of the reports and any recommendations be noted.

#### 8 **STP All-Age Mental Health Strategy Update**

Steve Trenchard, the STP Programme Director for Mental Health introduced and amplified his report (copy attached to the signed Minutes) which outlined the feedback from the period of engagement to support the development of an All-Age

Mental Health Strategy. He referred to the previous meeting when he had asked Board Members what three things they wished to fix and how to get there.

The STP Programme Director for Mental Health highlighted Figure 1 which set out the broad cohorts of Mental Health Need and explained that more could be done in terms of early intervention, particularly for young people, to prevent them going up the pyramid. He then drew attention to the feedback to the question, what three things would you most like to fix, which included having a sense of the person in receipt of care being involved, access to services, not just health, for example, homelessness, in order to stop the 'bounce' by getting the process right.

He explained that the report endorsed the ambition in the plan, of working together, good co-production, community hubs and a good primary care offer. The Director of Adult Services thanked the STP Programme Director for Mental Health for his informative report and felt that by seeing through a financial lens, more innovative solutions had been found.

The STP Programme Director for Mental Health responded to a number of queries from the Board and he confirmed that a CAMHS transformation plan had been approved and that things were already being done in line with the revisions to the NHS Transformation Plan. Members of the Board were supportive of a system wide approach of co-production. It was felt key now to understand how the whole design came together and how it would be moved forward to achieve what it wished to achieve.

The Chairman welcomed the report and the support for co-production.

**RESOLVED:** That the contents of the report and any recommendations be noted.

## 9 Public Health Financial Changes

Andy Begley, the Director of Adult Services, introduced and amplified his report (copy attached to the signed Minutes) which provided an update on Public Health within Shropshire Council, following Council approval of the 2019/20 budget and Financial Strategy on 28 February 2019.

The Director of Adult Services drew attention to the recommendations and the changes to non-mandated services. In response to a query, the Director of Adult Services confirmed that public health contributions to the CCTV service in Shrewsbury were to be stopped however as the service was used by a number of other agencies eg Shrewsbury Town Council and the police, conversations were taking place about how it would be funded going forward.

Concern was raised about the non-intended consequences of the changes to non-mandated services however the local authority's financial situation was understood. It was hoped that a co-designed model for the integration of public health across health and social care would lead to better outcomes.

Rachel Robinson, the Director of Public Health explained that it was hoped that these really difficult decisions would lead to things being done differently with an evidence base at the heart of everything they do. She recognised that more could be done

around the Joint Strategic Needs Assessment (JSNA) and that services needed to be designed to target local need.

**RESOLVED:** That the updates be noted and that the ambition to redesign and co-produce a new model of public health delivery for Shropshire be endorsed.

## 10 **Shropshire Alcohol Strategy 2016-2019 Update and next steps plus New Provider Update**

Jayne Randall, the Drug Action Team Leader introduced and amplified her report (copy attached to the signed Minutes) which provided the Board with an update on the progress made in the implementation of Shropshire Alcohol Strategy 2016-2019 and the next steps.

The Drug Action Team Leader explained that implementation and delivery of the Alcohol Strategy was within the remit of the Alcohol Strategy Group which in turn was accountable to the Shropshire Community Safety Partnership. Going forward, a joint Drug and Alcohol Strategy was being developed and was due to be published in April 2020 and which would underpin the work that organisations were doing around drug and alcohol intervention.

The Drug Action Team Leader drew attention to the national initiatives which had promoted the improved management of alcohol related harm, include the Local Alcohol Action Area initiative which supported improved data sharing between the police, hospitals and local authorities. She also informed the Board that a Licensing Policy Statement had been produced, which, it was hoped, would reduce violent incidents and those incidents occurring in the night time economy.

The Drug Action Team Leader highlighted the summary of activities undertaken to support delivery of the Shropshire Alcohol Strategy 2016-2019, set out at paragraph 5.6 of the report. Looking at the increase in the number of females aged 40-64 being admitted to hospital for alcohol-related conditions, the Drug Action Team Leader explained that getting the right help at the right time could reverse the damage caused to the liver.

The Drug Action Team Leader reported that since the Strategy had been published, there had been a 39% reduction in the number of people presenting to alcohol services for treatment, which was a national issue. Possible reasons for the reduction were found to be the integration of drug and alcohol services, the reduction in alcohol only workers, and reduced funding.

The Drug Action Team Leader stated that a workshop was being held at the end of June to develop the next strategy.

Turning to the New Provider Update, the Drug Action Team Leader introduced and amplified her report (copy attached to the signed Minutes) which provided an update on the retender of the specialist community drug and alcohol treatment and the new model for Shropshire. She reported that the contract had been awarded to Addaction, a national treatment charity. The new service model would be a hub and spoke model, which would include dedicated homeless support. The other services included within the model are set out at paragraph 5.7 of the report.

The Director of Public Health reiterated the importance of the strategy for housing, homelessness and mental health. In response to a query the Drug Action Team Leader confirmed that she was confident that Addaction had got the capacity to meet the demand in the system. In response to a further query in relation to why unmet need was recorded, the Drug Action Team Leader reported that of 2,792 people presenting to alcohol services, only 345 were in treatment. It was hoped that Addaction would increase the number in treatment to 1000.

**RESOLVED:** That the contents of the reports and any recommendations be noted.

## 11 Healthy Child Programme

Anne-Marie Speke, the Healthy Child Programme Co-ordinator, introduced and amplified her report (copy attached to the signed Minutes) which outlined the work undertaken as part of the Healthy Child Programme Partnership Board in the last 12 months and its next steps.

The Healthy Child Programme Co-ordinator informed the Board that a Task and Finish Group had been set up to look at how the Adverse Childhood Experience work could be embedded in practice across the system, which had been challenging as not all services were represented. However, an Action Plan had been developed and shared. A training matrix was now required to identify where agencies were in terms of competencies and Public Health England had been approached to support this work. The Healthy Child Co-ordinator drew attention to the Evidence Based Early Intervention work that had been submitted to the House of Commons.

Turning to School Readiness, the Healthy Child Programme Co-ordinator informed the Board that a Multi-Agency Task and Finish Group had been set up to map services and identify gaps in relation to improving school readiness. An action plan had been worked through and an A5 booklet had been produced to provide parents with information on how to support their child's development.

The Healthy Child Programme Co-ordinator discussed the Anna Freud Schools and Mental Health link project which has had a successful start in enhancing communication between schools and services that support children and young people's mental health. This work would be continued alongside the development of a sustainable multi-agency continuous professional development programme.

The Healthy Child Programme Co-ordinator touched on achieving a healthy weight and increasing physical activity along with the next steps around exploring a forum for joint commissioning of services and the Plan on a page for the coming year showing the key priorities. The Director of Children's Services explained that there were a number of Multi-Agency forums that would support the joint commissioning of services. In response to a query it was confirmed that 'child' meant those aged 19 and under or 25 for Special Educational Need.

**RESOLVED:** That the contents of the report and any recommendations be noted.

**12 Shropshire Children's Trust Update**

Karen Bradshaw, the Director of Children’s Services introduced her report (copy attached to the signed Minutes) which set out proposals for a new way forward for the Children’s Trust and its sub groups, as set out in Paragraph 2 of the report. She confirmed that the Children’s Trust as it now stood would be replaced by an annual Children’s Summit, the first of which would be taking place on 24 October 2019.

The Chairman welcomed the changes and was pleased that the Early Help Partnership Board, 0-25 SEND Strategic Board and Healthy Child Programme Partnership Board would be reporting directly to the Health and Wellbeing Board which would enable it to have a broader conversation and be more engaged with the health and wellbeing of children.

**RESOLVED:** That the contents of the report be noted and agreed.

**13 AOB**

The letter from NHS England and NHS Improvement (copy attached to the signed Minutes) in relation to the notification to change supplementary opening hours at St Martins Pharmacy was noted.

<TRAILER\_SECTION>

Signed ..... (Chairman)

Date: