



**Committee and Date**

Health and Wellbeing Board

23 October 2015

**MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING  
HELD ON 11 SEPTEMBER 2015  
9.30 - 11.15 AM**

**Responsible Officer:** Karen Nixon  
Email: karen.nixon@shropshire.gov.uk Tel: 01743 257720

**Present**

Councillor Karen Calder (Chairman)  
Councillors Ann Hartley, Lee Chapman, Professor Rod Thomson, Stephen Chandler,  
Karen Bradshaw, Dr Helen Herritty, Jane Randall-Smith and Dr Julie Davies (substitute for  
Paul Tulley).

Also in attendance:

Penny Bason, Charlotte Cadwallader, Irfan Ghani, Jane Gormley, Mike Ridley, George  
Rook, David Sandbach, Tracy Savage, Madge Shinetin, Dr Alan Sweeney, Sam Tilley,  
Dave Tremellen and Clive Wright.

**34 APOLOGIES FOR ABSENCE AND SUBSTITUTIONS**

Apologies for absence were received from Dr Caron Morton, Dr Bill Gowans, Paul  
Tulley and Rachel Wintle.

\*Heather Osborne substituted for Rachel Wintle and \*Dr Julie Davies substituted for  
Paul Tulley

**35 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.

**36 MINUTES**

**RESOLVED:** That the minutes of the meeting held on 31 July 2015, be approved  
as a correct record and signed by the Chairman.

Arising thereon;

To update the meeting, the Chairman referred to the recent Public Question about  
public toilet provision and suggested that the Board look towards other partners

such as the Chamber of Commerce to see if they wished to become involved in this piece of work. She also wished to re-assure that work was currently being undertaken to plot exactly where existing provision was as a starting point.

At Minute 31, Looked After Children, the Chairman sought an assurance that this work was also being done in conjunction with the Children's Trust, which the Director of Children's Services duly confirmed.

At Minute 32, the Chairman asked about future funding for the Young Health Champions and was told that this was definitely in place for the next 12 months, which was welcomed and noted.

Finally the Chairman expressed her thanks to everyone for their support during recent difficult times, saying everyone's support was much appreciated.

### **37 PUBLIC QUESTION TIME**

Three public questions were received; one from Mr D Sandbach and two from Mr G Rook. A full copy of each question and the formal responses were circulated at the meeting (copies attached to the signed minutes).

Question 1 – by way of a supplementary question Mr Sandbach highlighted the excellent work of Shropshire Young Health Champions in producing videos promoting health and asked the Board to continue promoting them as a valuable resource in the future, which was agreed. A meeting of the Operational Group was scheduled in the near future and it was agreed that this matter would be highlighted there also.

Question 2 – Mr Rook commented that he was heartened by the response to his question. He urged everyone to co-ordinate their approach. It had to be long lasting, resilient and sustainable.

Question 3 – Julie Davies confirmed that officers from Shropshire CCG would also be attending the conference on Dementia in December, along with Cllr Lee Chapman and Rachel Wintle (VCSA).

### **38 BETTER CARE FUND UPDATE SEPTEMBER 2015**

The Director of Adult Services introduced a report (copy attached to the signed minutes) on recent developments in the implementation of the Better Care Fund Plan focussing on updates from the Service Transformation Group and the Finance, Contract and Performance Group.

It was pleasing to note that the Better Care Fund (BCF) was on target.

In response to a question about the national perspective of Delayed Transfer of Care (DTC) figures, compared to Shropshire's performance, the Director of Adult Services stated that in some parts performance was good but that in other areas the system was struggling. Historically, Shropshire had struggled with DTC and

there was still more work to be done within the system to improve the figures and the situation for patients. The Director of Adult Services reported that currently to respond to pressure within the acute system more dtoc's were being recorded at an earlier stage than before, therefore he envisaged that the figure may go up further before it actually reduced.

On a technical note, the CCG reminded that BCF targets were slightly different to NHS England targets for DTOC generally and that this should be noted to avoid confusion.

It was confirmed that plans were in place to reconvene the Better Care Fund/Health & Wellbeing Board Lay Reference Group which was welcomed by the Community Health Trust. It was also noted that the BCF Reference Group (for provider groups) would also be re-starting in October, which again was welcomed.

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

### 39 COMMUNITY & CARE CO-ORDINATORS PROJECT

A progress report on the Community and Care Co-ordinators Project was introduced and amplified by the Director of Adult Services (copy attached to signed minutes) whilst Tracy Savage, Head of Medicines Management and Primary Care Support, Shropshire CCG, was present to answer any detailed questions.

The Chairman requested sight of the evaluation detail for this project, which Dr Julie Davies undertook to provide after the meeting.

The Board thanked Tracy Savage for her excellent work in driving this forward.

**RESOLVED:**

- a) That the evaluation detail for this project be provided to the Chairman and the Board after the conclusion of the meeting by Shropshire CCG.
- b) That the Health and Wellbeing Board note the progress and positive impact of the Community and Care Co-ordinators Project to date
- c) That the view of the Better Care Fund Performance, Finance and Contracts Group, that the project should move to a position of recurrent funding be endorsed by the Health and Wellbeing Board, once governance had been established.
- d) That the delegation responsibilities regarding finance be looked at and then reported back to the Health and Wellbeing Board at a future meeting for ratification.

#### 40 UPDATE ON INTEGRATED COMMUNITY SERVICES

The Integrated Community Service (ICS) programme supports discharge from hospital or prevents an avoidable hospital admission by ensuring that people get the right level of support at the right time in order to maintain their independence. ICS is the flagship service in the Better Care Fund Plan and one of the first models of Integrated Health and Social Care delivery within Shropshire.

The Director of Adult Services introduced a report (copy attached to the signed minutes), which provided an overview of the programme and its key components, an overview of Admission Avoidance pathway to be launched in North and South Shropshire and relaunched in Shrewsbury in October 2015, and an update of the Strategic Review undertaken in May 2015 and the subsequent delivery action plan which would inform the priorities of the ICS programme as it entered its final stage of development.

The Board was pleased to note that Shropshire was delivering at 72% activity compared to Best Practice target of 65%.

The problems of recruiting nursing staff to capacity were discussed and it was noted that the recruitment of non EU nurses was currently taking place because visas had been approved. It was hoped that this should alleviate the recruitment problem.

It was noted that a development plan would be worked up, including timescales, which was welcomed by the Board.

**RESOLVED:** That the report and progress to date be received and noted.

#### 41 URGENT CARE RECOVERY AND DELIVERY OF WINTER ACCESS

Dr Julie Davies, Shropshire CCG, introduced and amplified a PowerPoint presentation on urgent care recovery and the delivery of winter access (copy attached to the signed minutes). This covered an overview of the different approach taken to develop the recovery plan; potential risks to delivery; the Shropshire & Telford Hospitals Trust Action Plan; Shropshire Community Trust & Local Authority Action Plan; Shropshire CCG Action Plan and Telford & Wrekin CCG & Local Authority Action Plan.

In respect of governance and monitoring it was noted that a different approach had been agreed;

- Weekly monitoring at each system level by Chief Officers
- Monthly programme overview at the System Resilience Group (SRG) – next update would be made on 18<sup>th</sup> September 2015.

A discussion ensued about the difficulties of recruiting overseas nursing staff and the stringent visa pressures that made this difficult, coupled with the need to recruit extra nursing staff required to cope with the looming winter pressures.

The take up of the flu vaccine amongst staff was also discussed. It was noted that locally providers had done well and that in respect of staff, including nurses and doctors take up was over 80%. It was agreed that the Public Health Consultant would provide an update on the success of the immunisation campaign in Shropshire to the next Health and Wellbeing Board.

**RESOLVED:**

- a. That the presentation be welcomed and noted.
- b. That the Public Health Consultant provide an update on the success of the immunisation campaign in Shropshire to the next Health and Wellbeing Board.

**42 HEALTH AND WELLBEING STRATEGY - PROGRESS UPDATE**

A progress report on the Health and Wellbeing Strategy was introduced and amplified by the Health and Wellbeing Co-ordinator (copy attached to the signed minutes).

Clive Wright, Chief Executive, Shropshire Council said that 'The Big Conversation' was about to be started across Shropshire and he very much hoped to include this work in there and thereby develop future governance built upon the Health & Wellbeing Strategy. Due to anticipated budget cuts following the announcement of the Autumn Statement he said that Shropshire's services would inevitably have to change and regrettably some may even be stopped altogether. He believed more integration of services was key to working more smartly in the future, with services such as the police and ambulance service. He very much wanted the public to be involved and to comment on what services were important to them and why. He welcomed the input of key partners and anyone else who wanted to engage with the Council.

It was agreed that the 3 exemplars chosen (largely through the Joint Strategic Needs Assessment) and through conversations with providers) should be worked on for an initial 2 year period, to be reviewed annually.

It was highlighted that no outcomes were mentioned in the exemplar areas and that this should be included to ensure there was clarity. The challenge will be to look back in five years to see what differences had been made from then to now.

A discussion ensued about the built environment and planning and how it impacted on people's health. It was stressed that often rules were set nationally in respect of national planning guidance and they could not be changed. The Board was keen to see some development and work in this area.

The Chairman asked the Board if they felt a short update visit by the Peer Challenge team might be useful in the early part of 2016. This was generally welcomed and it was agreed that this be arranged (exact date to be discussed and agreed upon after the meeting).

**RESOLVED:**

- a) That the Board agreed the final draft strategy;
- b) That the Board agreed that as part of the consultation of the strategy all stakeholders be asked for their input on the following areas for development;
  - Weight and Diabetes Care
  - Mental Health
  - Carers
- c) That the Board noted the further areas of development including the action plans and governance structures to deliver the strategy and exemplar projects.
- d) That a Peer Review be agreed in principle for early 2016 (exact date to be discussed and agreed upon after the meeting).

<TRAILER\_SECTION>

Signed ..... (Chairman)

Date: