#### **HEALTH & WELLBEING BOARD**

## Minutes of the Meeting held

Wednesday, 17th May, 2017, 11.00 am

Councillor Vic Pritchard (Chair) Bath & North East Somerset Council

Dr Ian Orpen Member of the Clinical Commissioning Group

Russ Bennett Avon Fire and Rescue Service

Jayne Carroll Virgin Care

Mark Coates Knightstone Housing

Tracey Cox Clinical Commissioning Group

Morgan Daly Director for Communities - Healthwatch B&NES

Councillor Michael Evans Bath & North East Somerset Council

Teresa Hallett Bath College

Steve Kendall Avon and Somerset Police

Bruce Laurence Bath & North East Somerset Council

Professor Bernie Morley University of Bath

James Scott Royal United Hospital Bath NHS Trust

Andrew Smith BEMs+ (Primary Care)

Sarah Shatwell DHI (VCSE sector)

Jane Shayler Bath & North East Somerset Council

Elaine Wainwright Bath Spa University

Observer

Councillor Tim Ball Bath & North East Somerset Council

## 48 WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

#### 49 EMERGENCY EVACUATION PROCEDURE

The Chair drew attention to the evacuation procedure as listed on the call to the meeting.

#### 50 APOLOGIES FOR ABSENCE

Apologies for absence were received from:

Ashley Ayre – Chief Executive B&NES
Mike Bowden – Strategic Director, People and Communities, B&NES
Steve Imrie – Avon Fire and Rescue Service (Substitute – Russ Bennett)
Laurel Penrose – Bath College (Substitute – Teresa Hallett)

#### 51 **DECLARATIONS OF INTEREST**

There were no declarations of interest.

#### 52 TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIR

There was no urgent business.

## 53 **PUBLIC QUESTIONS/COMMENTS**

There were no public questions or comments.

#### 54 MINUTES OF PREVIOUS MEETING

The minutes of the meeting held on 7 December 2016 were approved as a correct record and signed by the Chair.

It was noted that the Sustainability and Transformation Plan would not now be published until after the general election due to purdah rules.

## 55 **IMPROVED BETTER CARE FUND PLAN (IBCF) - 2017/18 - 2018/19**

The Board considered a report regarding the Better Care Fund (BCF) Plan 2017/18 – 2018/19. The report gave a summary of the BCF guidance, policy framework and key priorities. A draft "Delayed Transfers of Care" action plan was also included as an appendix.

The Senior Commissioning Manager, Better Care, outlined the following issues:

- New schemes will be coming on line over the next two years.
- The formal guidance has not yet been published.
- It is important to find a balance between dealing with immediate social care budget pressures and investing strategically in additional preventative services to improve the financial sustainability of service provision over the longer term.

- There are clear conditions of access to the BCF which have to be met in order to access the funding. The BCF must be transferred into one or more pooled funds established under section 75 of the NHS Act 2016. The spending plans must be agreed by the Health and Wellbeing Board and signed off by the relevant local authority and CCG.
- The current BCF performance dashboard showed that the B&NES area was performing well in most areas.
- The priorities for the next two years were outlined including updates from existing priority schemes and new schemes for 2017-19. These included a focus on new assistive technologies.
- There will also be a focus on transformation and redesign of services.
- Funding is to be set aside for providers of care, including to ensure a fair price is paid for care home fees and that the cost of paying the National Living Wage, including for sleep-in cover, can be paid by the care provider.
- The next steps included the development of a detailed iBCF Plan in anticipation of the publication of the detailed implementation guidance, final conditions and supporting submission documentation.

It was noted that an increasing number of care providers are withdrawing from the market. Four care homes (144 bed places) had been lost in B&NES in the last year.

Sarah Shatwell welcomed the recommendations set out in the report and, in particular, the proposals in relation to an increased focus on a strengths based approach, continued investment in social prescribing and the development of a support planning and brokerage service. She felt that social prescribing services can be more joined-up and streamlined with other wellbeing/preventative services. Sarah also emphasised the skills, knowledge and experience that those working in the voluntary, community and social enterprise (VCSE) sector have, particularly in relation to a strengths based approach to assessment and support planning. It was agreed that the VCSE sector has a key role to play, including with those people with complex and acute needs living in the community.

James Scott asked how the priorities had been developed. It was explained that they had been developed from a range of sources including the Health and Wellbeing Board Strategy, the Accident and Emergency Delivery Board and the Your Care Your Way Strategy. James Scott stated that the RUH had some issues in relation to the Home First model and proposals. Tracey Cox confirmed that some of the proposals for the Home First Investments had come from the RUH. It was agreed that these issues would be discussed outside of the meeting.

It was confirmed that the detailed spending proposals would be set out in the final submission.

Tracey Cox noted that the report contained a great deal of detail and that more clarity would be required in the submission in relation to key milestones and decision points to ensure that there is a clear plan for delivery of the proposals and that the investment proposals do achieve improvements in the provision of integrated health and care services.

#### **RESOLVED:**

- (1) To note the Policy Framework, Context and draft Conditions for the 2017/18 2018/19 Improved Better Care Fund.
- (2) To agree the priority areas for investment of the Improved Better Care Fund as set out in the report.
- (3) To delegate to the Co-Chairs of the Health and Wellbeing Board formal signoff of the final submission of the 2017-18 2018/19 Improved Better Care Fund Plan.

## 56 YOUR CARE YOUR WAY UPDATE

Sue Blackman (Project Lead) and Jayne Carroll (Regional Director of Operations) presented an update on the Your Care Your Way project. A copy of the presentation is attached as *Appendix 1* to these minutes. The following issues were outlined:

- It was noted that the transition of services to Virgin Care had been very smooth with minimal problems. The Board thanked all partner organisations, including Sirona Care and Health, for facilitating such a safe transfer.
- Virgin Care have now taken on responsibility for:
  - Children's Services such as Health Visiting and Speech and Language services
  - Adult Health and Social Care Services such as District Nursing and Physiotherapy services
  - Statutory Services such as adults statutory social care, continuing healthcare and Children's services.
- 1,300 staff had safely transferred on 1 April 2017. A comprehensive 100 day plan is being deployed including review of services, operation procedures and policies.
- Over 90% of teams have attended arrivals events with overwhelming positive feedback.
- There is now a single point of access for queries to enable support to be provided for those needing help quickly.
- Managers have received additional training on systems, support and new values and objectives for the year ahead.
- Virgin Care has continued to engage with stakeholder groups and has proposed an external engagement strategy which was due to be discussed with community champions next week.
- Over 200 new phones have been rolled out to enable staff to access emails on the move. These have been positively received by colleagues.
- All colleagues, carers and subcontractors had received first payments successfully.
- The falls pick up service was launched on 2 May 2017.
- The Service Development and Improvement Plan is being worked on, a review of community hospitals is being carried out and a pathway review of Home First implementation is also being undertaken.
- In the next month the review and redesign of wellbeing services, involving all partners is being launched, mobile phones will be rolled out to the wider workforce and the "Virtual Desktop" environment will be implemented.

The following lessons had been learnt:

- The engagement and the involvement of Community Champions was deemed "gold standard" but there was a need to consider in the next stage how to increase the diversity of the group.
- Internal communications and co-production with staff was as important as communications and engagement with the public.
- Matching the scale of the project with the timeframe for delivery was key.
- Defining the scope of the project should be clear at the outset.
- Strong leadership and project management was paramount.
- Staff feel more connected to their colleagues as a result of their involvement in the project.

Bruce Laurence noted that this was one of the largest and most complex commissioning processes that he had experienced. It had been a very successful transition and presented a real opportunity for system leadership for the Health and Wellbeing Board.

Dr lan Orpen stated that it was important to build on the connections with GPs and the community teams.

Cllr Vic Pritchard acknowledged the efforts made by all involved in the project to ensure a safe transfer. The Board thanked and congratulated staff for all their hard work on this project and the successful transition.

**RESOLVED:** To note the update report.

## 57 **SUGAR SMART COUNCIL**

The Board considered a report regarding the imminent public launch of the Bath and North East Somerset Sugar Smart Campaign. Jameelah Ingram (Public Health Development and Commissioning Manager) and Sophie Kirk (Corporate Sustainability Officer) gave a presentation regarding the campaign. A copy of the presentation is attached as *Appendix 2* to these minutes.

The presentation covered the following issues:

- Today's children are the first generation predicted to die before their parents due to poor diet and inactivity.
- Healthy weight has been identified as a key priority by the Health and Wellbeing Board.
- The recommended average population maximum intake of sugar should be halved (5% dietary energy).
- Reducing the amount of sugar in sweetened drinks by 40% over five years could prevent 300,000 cases of type 2 diabetes and one million fewer people who are obese nationally.
- Sugar sweetened drinks are the biggest source of sugar in pre-school children.
- As part of its Childhood Obesity Strategy the Government announced a soft drinks industry levy in the March 2016 budget which will come into effect in 2018.

- The Sugar Smart Campaign is aimed at reducing sugar consumption across B&NES. It is part funded by Sustainable Food Cities, Jamie Oliver Food Foundation and Sustain, the alliance for better food and farming.
- B&NES will be the first national Sugar Smart campaign reaching both rural and urban areas. The official launch will be in July 2017.
- A Sugar Smart Steering Group had been set up with key partners; engagement had already taken place with schools and businesses.
- The Radstock and Westfield areas had become the new flagship Sugar Smart Neighbourhood.
- There would be a big social media and digital campaign.
- The campaign focus would adopt a needs based, settings approach.

Bruce Laurence stated that consumption of sugar was a major contributor to obesity and also to tooth decay. The broad support of the Health and Wellbeing Board would empower the team to take forward the campaign. He also pointed out the need to encourage the food industry to change their behaviour around the marketing and cost of certain foods.

Sarah Shatwell welcomed the campaign but stated that it was important not to stigmatise particular communities. It was also necessary to understand the attitudes and issues that lead to over-consumption of sugar.

#### **RESOLVED:**

- (1) To provide strategic support for the Sugar Smart Campaign.
- (2) To support key public sector and health promoting organisations across Bath and North East Somerset to sign up to the Sugar Smart Campaign and make pledges to support a reduction in sugar intake.

## 58 CLOSING REMARKS/TWITTER QUESTIONS

There were no Twitter questions.

#### 59 **DATE OF NEXT MEETING**

It was noted that the next meeting would take place on 12 July 2017.

Prepared by Democratic Services	
Date Confirmed and Signed	
Chair	
The meeting ended at 12.35	pm



# Your Care, Your Way Health and Wellbeing Board Wednesday 17th May 2017

Bath & North East Somerset Council



## **Service delivery**



Children's services

School nursing
Health Visiting
Family Nurse Partnership
Children's community
nursing
Designated Doctor roles
Speech and language
Safeguarding
Bladder and bowel
Learning disability nursing
Children's weight
management
Paediatric audiology
Youth offending nurse
specialist

Adults health and social care services

Bladder and bowel Community hospital inpatients Continuing health Care District nursing Falls and movement Integrated reablement Learning disability provision Lymphedema nursing Orthopaedic interface (MSK) Physiotherapy Specialist cardiac and respiratory Specialist neurology & stroke Speech and language therapy Minor injuries unit Podiatry services Community based mental health (selected services) Wellness and wellbeing services Specialist diabetes provision

**Statutory Services** 

Adults statutory social care Continuing Healthcare Children's Services

## Service commissioning



Children's services

#### Adults health and care services

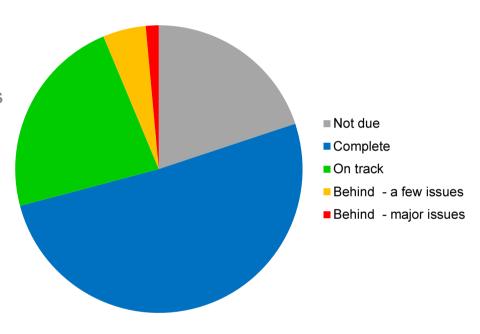
Physiotherapy
Occupational therapy
Paediatric audiology
Small elements of
children's weight
management

Integrated sexual health
End of life care
Medicines optimisation
Direct payments and personal
budgets
NHS Health Checks
Substance misuse
Adults hearing therapy
Community equipment
Dementia support
Stroke and neurology Dr provision
Community based mental health
services (selected services)

Adults Carers Centre
Care at home
Home from hospital
Extra Care Housing
Elements of the wellness and
wellbeing provision (e.g.
employment inclusion)
Housing related support
Homelessness prevention
Independent living services

## Review of safe transfer technicalities

- 1,300 colleagues safely transferred on 1st April
- \* People using services also experienced a safe transfer and no disruption to services they were using. Appointments upheld
- \* All safety and quality requirements during this transfer period were achieved.
- Virgin Care are now actively participating in a number of Boards, delivery plans and urgent care planning activities
- \* A comprehensive 100 day plan is being deployed including review of services, operating procedures and policies.
- \* The progress on the 100 day plan and risk registers are shared weekly with commissioners.



Current 'Business as usual' status

## Developments so far

- \* People we have had attendance from over 90% of teams at arrivals events, with overwhelming positive feedback.
- \* Support we have a single point of access for queries and to enable us to support those that need help quickly.
- Training managers received additional training on systems, support and new values and objectives for the year ahead
- \* Communications we have continued to engage with stakeholder groups and have proposed an external engagement strategy which is due to be discussed with community champions next week
- \* Systems and people we have rolled out over 200 new phones to enable staff to get access to emails on the move. Positively received by colleagues
- \* Pay all colleagues, carers and subcontractors have received first payments successfully.

# Service development falls pick up service

- \* The falls pick up service was launched on 2<sup>nd</sup> May 2017
- \* It is a joint service development with the RUH and SWAST
- \* It enables those who fall at home to be responded to by a therapist working alongside a paramedic to avoid being admitted to hospital and receive more timely specialist support.
- ★ In the first 4 days, the team saved 2 elderly people from having to be conveyed into hospital



## RUH-Therapies @PTOTSLTdept · May 2

Fab first day for our Falls Rapid Response Team @RUHBath @swasFT and Banes Community #fixingfallsinthecommunity @kittikate10 @nhsbanesccg







## Coming up in the next month....

## We have been

- \* working with the commissioners on developing the Service Development and Improvement Plan, including reviews of: mental health services, continuing health care and reablement
- undertaking a joint review of community hospitals with commissioners & integrating outcomes into our transformation plan
- \* undertaking pathway review of home-first implementation across community services and are quickly developing a new roll-out plan. Next month the plan will be launched

## We will be

- \* launching the review and redesign of wellbeing services, involving all partners
- \* continuing to roll out mobile phones to the wider workforce
- implementing our 'Virtual Desktop' environment in June

# **Delivering Transformation**





















## **Lessons Learnt**

Our engagement and the involvement of Community Champions was deemed 'gold standard' but we need to consider in the next stage how we increase the diversity of the group

Internal communications and co-production with staff is as important as communications and engagement with the public

Matching the scale of the project with the timeframe for delivery is key

Defining the scope of the project should be clear at the outset

Strong leadership and project management is paramount

Staff feel more connected to their colleagues as a result of their involvement in the project



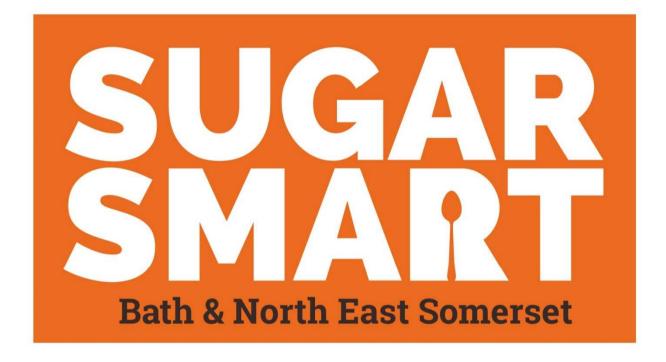


# **THANK YOU**

Bath & North East Somerset Council



This page is intentionally left blank



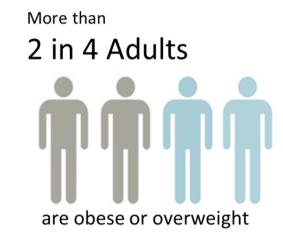
Sophie Kirk, Sustainability Officer (Food)

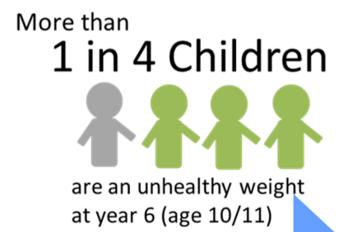
Jameelah Ingram, Public Health Commissioning and
Development Manager

## **Local Context**

 Today's children are the first generation predicted to die before their parents due to poor diet and inactivity.

 Healthy weight has been identified as a key priority by the Health and Wellbeing Board





# Why Sugar?

**Scientific Advisory Committee on Nutrition**: The recommended average population maximum intake of sugar should be halved (5% total dietary energy)



In B&NES many children are consuming **3 X more sugar** than they should



In B&NES many adults are consuming **2 X more sugar** than they should

# Why Sugar?

 It is predicted that reducing the amount of sugar in sweetened drinks by 40% over five years could prevent 300,000 cases of type 2 diabetes and one million less people who are obese nationally over a decade



- Childhood Obesity Strategy: the government announced a soft drinks industry levy in the March 2016 budget which will come into effect in 2018
- Sugar-sweetened drinks and fruit juices are the biggest source of sugar in pre-school children



# How Sugar Smart are you?

# Q – Rank these 3 drinks in terms of their sugar content – Highest to lowest

- Ribena (500 ml)
- Pret freshly squeezed orange juice (500 ml)
- Starbucks Venti White Chocolate Mocha with whipped cream

# Not an easy choice!

1 2 3



74g of sugar Sugar Equivalent: 10 bowls of nestle golden grahams



52.6g of sugarSugar Equivalent:13 chocolate oreobiscuits



51g of sugar Sugar Equivalent: 13 hobnobs



# The campaign

- A 2 year community wide campaign aimed at reducing sugar consumption across Bath and North East Somerset.
  - Raise awareness of sugars in everyday food and drinks
  - Reduce the availability of high sugar food and drinks in targeted settings
- Part funded by Sustainable Food Cities, Jamie Oliver Food Foundation and Sustain; the alliance for better food and farming
- Sugar Smart campaigns in Bristol, Brighton and Hove, Exeter and London
- B&NES will be the first national Sugar Smart campaign reaching both rural and urban areas
- Official launch July 2017



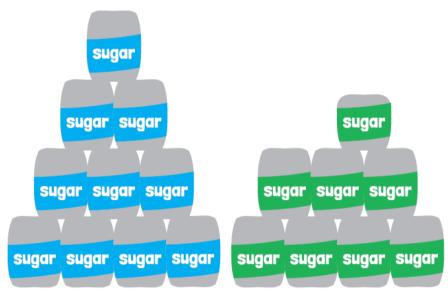






# Journey to date

- Sugar smart steering group with key partners
- Change 4 Life Be Food Smart packs sent to all schools
- 10 sugar smart assemblies delivered in primary schools
- Engagement with over 60 West of England businesses
- Eat Out, Eat Well Award
- Intern appointed



B&NES Council's catering service has **reduced sugar in school meals by 23%** since January 2017



## **Campaign Focus**

- Needs based
- Communications and events
- Needs based, settings approach









Sports and leisure



Neighbourhoods



# **Key Outputs**

## **Organizational Outputs**

- B&NES Council signs up to a Sugar Smart Charter/ Declaration for 3 years
- B&NES council and public sector organisations provide healthy and sustainable food in its catering outlets and concessions
- 60 organisations across B&NES sign up to the Sugar Smart initiative by April 2018
- Commissioned Wellness Service (Virgin Care) to be Sugar Smart and sign ups made by subcontracted providers

## **Community Outputs**

- Radstock and Westfield becomes the new flagship Sugar Smart Neighbourhood
- Minimum 2 high profile events are held.
   Event with Bath Rugby to engage over 10,000 people
- 1000 people take Sugar Smart survey and/ or Sugar Smart Challenge
- 5 Community challenges delivered
- 5 community volunteers recruited

# Sugar Smart

https://www.youtube.com/watch?v=0w6WF 0s3mDE





## **Partners**

- Jamie Oliver Food Foundation
- Health and Wellbeing Board
- Bath Rubgy and Bath Rugby Foundation / Leisure Centres/ Sports clubs
- Educational Settings
- Community Events and play days
- Workplaces big employers/ linked to Healthy Workplace Charter
- CCG and Virgin Care— Wellbeing Services
- Media TV/ Radio/ Newspapers
- Wessex Water
- Healthy Living Centres/ Community Groups
- Food businesses/ Restaurants/ Cafes/ Takeaways
- Local Food Partnership
- Pharmacists/ Dentists





# Any Questions?



This page is intentionally left blank