HEALTH & WELLBEING BOARD

Minutes of the Meeting held

Tuesday, 30th January, 2018, 10.30 am

Dr Ian Orpen Member of the Clinical Commissioning Group

Councillor Vic Pritchard Bath & North East Somerset Council

Mark Coates Knightstone Housing

Steve Kendall Avon and Somerset Police

Bruce Laurence Bath & North East Somerset Council

Professor Bernie Morley University of Bath

Laurel Penrose Bath College

James Scott Royal United Hospital Bath NHS Trust

Andrew Smith BEMS+ (Primary Care)

Jane Shayler Bath & North East Somerset Council

Elaine Wainwright Bath Spa University

Kirsty Matthews (in place of Jayne

Carroll)

B&NES Community Services

Non-Voting Member: Cllr Eleanor Jackson (B&NES Council)

36 WELCOME AND INTRODUCTIONS

The Chair welcomed everyone to the meeting.

37 EMERGENCY EVACUATION PROCEDURE

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

38 APOLOGIES FOR ABSENCE

Apologies for absence were received from:

Ashley Ayre – B&NES Council
Mike Bowden – B&NES Council
Jayne Carroll – Virgin Care (substitute Kirsty Matthews)
Tracey Cox – CCG
Cllr Paul May – B&NES Council
Hayley Richards – AWP
Sarah Shatwell – Developing Health and Independence

39 **DECLARATIONS OF INTEREST**

There were no declarations of interest.

40 TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIR

There was no urgent business.

41 PUBLIC QUESTIONS/COMMENTS

Three questions were submitted by John Drake, Regional Organiser, UNISON South West. A copy of the questions and responses are attached as *Appendix 1* to these minutes.

42 MINUTES OF PREVIOUS MEETING - 25 OCTOBER 2017

The minutes of the meeting held on 25 October 2017 were approved as a correct record and signed by the Chair.

43 CHILDREN AND YOUNG PEOPLE SUB GROUP REPORT

The Board considered a report from the Children and Young People Sub-Group of the Health and Wellbeing Board.

Officers thanked all partners and the young people who had assisted in the production of the draft Children and Young People's Plan 2018 – 2021. The new plan set out the vision, outcomes and priorities that will best support children and young people in B&NES to achieve the best possible outcomes.

The vision is that "all children and young people will enjoy childhood and be well prepared for adult life."

The 4 outcomes are:

- All children and young people are safe
- All children and young people are healthy (physical and emotional)
- All children and young people have fair life chances
- All children and young people are active citizens within their own community

The 4 cross cutting themes are:

- Strengthen early help
- "Think family" approach
- Narrowing the attainment and inequalities gap
- A skilled and competent workforce

Officers also informed members of the consultation process to be followed and the next steps.

Board members then discussed the following issues:

- The importance of considering the effect of social media on the health and emotional wellbeing of young people. It was vital to consider online safety.
- It will be important in future to work more closely with partners due to services being under increasing pressure.
- There is a focus on early intervention and joined up services. Peer support and mentoring will also be key.
- It was noted that there could be opportunities to work more closely with the universities given the large student population in Bath.
- Bath College has a significant amount of data, which can be shared as appropriate, relating to 16-19 year olds, with a particular focus on protected characteristics and areas of deprivation.
- It was suggested that more emphasis should be put on housing as the risk of homelessness can greatly affect children and young people.

A copy of the presentation slides is attached as *Appendix 2* to these minutes.

RESOLVED:

- (1) To endorse the draft Children and Young People's Plan for 2018 2021 (attached as appendix 1 to the report) and to agree that each individual agency supports and promotes the outcomes and priorities within their service delivery to children, young people and their families.
- (2) To note the timescales on the completion of the Year 4 review of the Children and Young People's Plan (covering 2017 2018) and the proposal that the completed Year 4 review is presented to the Health and Wellbeing Board in December 2018.
- (3) To receive six monthly information reports in June and December on the work undertaken by the Children and Young People Sub-Group and its delivery groups.
- (4) To note the B&NES Local Safeguarding Children's Board (LSCB) challenges 2017 – 2018 to the Children and Young People Sub-Group from the work of the LSCB and its Annual Report 2015 – 2016 and Business Plan 2015 – 18. (These challenges will be reported on every 6 months within the LSCB Business Plan and annually in June to the Health and Wellbeing Board).
- (5) To endorse the draft CAMHS Transformation Plan 2017 2018 which details

the range of additional support commissioned by the CCG, Local Authority and schools to improve children and young people's emotional health and wellbeing.

44 BATH AND NORTH EAST SOMERSET PHARMACEUTICAL NEEDS ASSESSMENT 2018-2021

The Board considered a report regarding the refreshed 2018 – 2021 Pharmaceutical Needs Assessment (PNA) which was currently out for consultation.

The PNA is a statement from the Health and Wellbeing Board which describes the provision of pharmaceutical services across Bath and North East Somerset, as well as assessing whether there are any significant gaps in the provision of local pharmaceutical services. The key findings will help to inform the future commissioning and delivery of local pharmacy services by NHS England, the CCG and the Council.

The key findings of the report are:

- There are no significant gaps in the current provision of easily accessible local community pharmaceutical services that serve all three PNA areas in B&NES.
- Within the existing pharmaceutical provision there are a number of pharmacies that do not have wheelchair accessible "closed" consultation rooms.
- It is anticipated that current pharmaceutical provision from existing pharmacies will be able to cope with the demand from new populations during the period of this PNA.
- There are no known planned relevant local NHS services that could significantly alter the need for pharmaceutical services in B&NES.

It was noted that further work may be required to ensure that there is alternative provision for wheelchair users within a suitable distance of their homes.

Officers confirmed that substance misuse services were covered within the assessment.

It was noted that the majority of people still collect their prescription medication from their local pharmacy. However, this may change in the future with more electronic prescribing and delivery services which could affect the viability of local pharmacies. Seven day working is also becoming more prevalent so the term "out of hours" is becoming less relevant.

Officers explained that if a pharmacy were to close then this would lead to a gap being identified by the PNA Steering Group which meets regularly.

Local communities have been consulted as part of this process and satisfaction with pharmacy services is high.

RESOLVED:

(1) To note the key findings set out in the current draft Bath and North East

Somerset Pharmaceutical Needs Assessment 2018 – 2021.

- (2) To delegate authority to the co-chairs of the Health and Wellbeing Board to approve the final version of the Pharmaceutical Needs Assessment 2018 -2021 following the end of the consultation period in February and any further amendments made in March 2018.
- (3) To agree the proposed arrangements for maintaining and keeping the Pharmaceutical Needs Assessment up to date.

45 MENTAL HEALTH PATHWAY REVIEW

The Board considered a report which summarised the feedback and findings from the Mental Health Pathway Review and made recommendations for further areas of work.

The Review Team has engaged with service users, carers, providers and the general public. This has highlighted a number of areas where people felt that services could improve along with some areas where services were duplicated.

There are 6 workstreams as follows:

- Mental Health Collaborative
- Care Co-ordination
- Crisis Response
- Employment
- Transition
- Governance

It was noted that in there may be opportunities to expand the crisis response service provided by The Wellbeing House. It is currently only available from Monday to Friday and has no staff on site after 5pm which means that there is no safe haven out of hours.

It was also important to consider physical and mental health services together as mental health can often have an effect on a person's physical health.

Concern was expressed about the fact that the options appraisal regarding future contracting arrangements had been unable to conclude because further guidance from HMRC is awaited.

Some work is also taking place regarding flexible transitions between children and young people's mental health and adult mental health with a view to commissioning specific services for this younger age group.

Healthwatch was pleased to see that the report highlighted collaborative working between services. It was noted that some services currently shared with the voluntary sector had been affected by the review. Officers confirmed that information will be circulated to various organisations and partners following this meeting.

The Director, Integrated Health and Care Commissioning, also gave an update regarding the Mental Health Prevention Concordat which covered the following issues:

- Leadership
- Year of Mental Health this will take place from April 2018 March 2019.
 The possible outcomes were also outlined.
- An initial planning session for the year has taken place and a small planning group will be established to develop a communications plan and schedule of events.

A copy of the presentation slides is attached as *Appendix 3* to these minutes.

RESOLVED:

- (1) To note the proposed allocation of resources.
- (2) To note the process in respect of future contracting arrangements.

46 **BETTER CARE FUND PLAN 2017-2019 UPDATE**

The Board considered a report which gave an update on performance against the B&NES Better Care Plan. This included an update on schemes, governance, finance and the position against delayed transfers of care (DTOCs) from hospital.

The report also set out details of the national performance metrics. The metrics so far this year demonstrate a health and social care system under significant pressure. It was noted that permanent admissions of older people to residential and nursing care homes were 2% below plan. The number of people being placed at home with very intensive care packages has also decreased.

There are a number of schemes in place to reduce delayed transfers of care as follows:

- Reablement and its review
- 7 day working in Home First
- Discharge to Access beds
- Support planning and brokerage (commissioning Care Home Select to provide interim support)
- Community equipment
- Fracture support pathway beds
- Community hospital review

Work is ongoing with Virgin Care and a number of schemes are progressing well. However, some measures have been delayed which means that they have not been as effective as expected.

The use of the additional 5 beds that had been provided would be evaluated to gauge whether this was set at the right level.

Board members were keen to see community equipment being recycled as much as

possible. Officers informed the Board that a stocktake has been carried out and that some equipment has been returned. An equipment amnesty is also planned to take place in February.

The figures reflected the national situation and it was noted that evidence showed that the number of emergency admissions are growing and are currently at record levels. This is proving to be a challenge for the RUH.

Concern was also expressed about the projected growth in the number of people aged over 85 which is predicted to grow by 13.6% in the next 10 years. This is likely to present a significant challenge to the health and social care sectors.

RESOLVED: To note the update on the Better Care Fund 2017-19 provided in the report and appendices.

47 DATE OF NEXT MEETING

It was noted that the next meeting would take place on Tuesday 17 April at 10.30am in the Brunswick Room, Guildhall, Bath.

Prepared by Democratic Services	
Date Confirmed and Signed	
Chair	
The meeting ended at 12.25 p	m



1. It has been reported to UNISON that one of the IT drive systems used by Virgin Care crashed in December causing a loss of data from the 8th December 2017. This data is, apparently, unrecoverable. What impact assessment has been carried out to determine any potential risk to service users?

Response:

Virgin Care has confirmed that a loss of operational data occurred in December 2017, this data related to activity recorded for operational purposes and contained no personal identifiable information. A hard copy of the data had been kept so it was possible to retrieve all lost data through manual entry. The purpose of collecting the data was to evidence the amount of activity specific teams undertook. This data is not a commissioning requirement and is purely for Virgin Care's internal operational management purposes. An impact assessment regarding the loss of the data was not required in this instance as it was it related to internal operational data and this data was not directly linked to service delivery or service user records.

From an IT perspective Virgin Care are working with their data hosting partner to fully assess and understand what caused this issue. As part of this Virgin Care has reviewed internal data backup processes and introduced daily alerting to any inconsistencies in the backup datasets.

Council and CCG Commissioners will continue to review and monitor via our internal governance arrangements and specifically through the monthly Finance and Information Group.

2a. What measures are in place for front line social care staff to ensure they are compliant with the Care Act and associated case law?

Response:

Front line social care staff employed by the Council are supported to understand the legal framework in which they are working through a range of measures which include: training, professional supervision, auditing of case files and case discussions with their team/ manager or with a multi professional panel. The Principal Social Workers also provide monthly topic specific learning sessions which are open to all staff undertaking the Council's statutory social care duties. These sessions cover legislation, guidance, case law and local procedures relevant to the topic, recent sessions have discussed Direct Payments, Best Interest Decision Making and Charging for Social Care Services.

For frontline social care services commissioned by the Council there are a range of requirements for the provider regarding compliance with the Care Act. These include: expectations regarding case audits, a requirement that all

staff undertaking the delegated statutory social care duties must be legally literate both in regard to the legislation that applies to Adult Social Care and what that means in practice, a requirement for there to be a workforce strategy in place that supports the ongoing learning and development needs of the social care workforce. The Council also has a Legal Advice Protocol in place that outlines how access to the Council's legal team can be obtained by all staff delivering statutory social care functions.

All registered professionals also have a responsibility for their own learning and development in this area. Both Occupational Therapists and Social Workers are required within the HCPC Standards of Proficiency to be able to practice within the legal and ethical boundaries of their profession. For Social Workers this includes a requirement to understand current legislation applicable to social work with adults. For Occupational Therapists there is a requirement to know about current legislation applicable to the work of their profession.

2.b Do front line staff have direct contact with legal services to ensure compliance with complex legislation?

Response:

Direct access to legal services is available to Council employed front line staff For services commissioned by the Council the Legal Advice Protocol outlines how this support can be accessed. It does request that all initial requests for advice on a matter are made via a senior social care manager. This is to ensure that the advice sought requires a legal rather than practice response. It also enables the Council to monitor these potentially complex situations and ensure that any additional advice or support required from the Council's lead professionals is provided. Once the request is received by legal services there is direct contact between the legal services team and the practitioners involved in the situation. The legal services team also attend the monthly topic specific learning sessions arranged by the Principal Social Workers.



Children and Young People's Plan 2018 - 2021

- Children and Young People's sub group of the Health and Wellbeing Board oversee the delivery of the plan and reports on the delivery of the CYPP outcomes.
- It sets out the vision, outcomes and key priorities that will best support children and young people in B&NES to achieve the best possible outcomes.
- Describes how B&NES and partner agencies must work collaboratively to promote good emotional health and well-being and reduce inequalities.
- Links to H&WB strategy, LSCB Business Plan, Workforce Strategy and shared with other directorates

Our Vision

All children and young people will enjoy childhood and be well prepared for adult life

Our 4 Outcomes

- All children and young people are safe
- All children and young people are healthy (physical and emotional)
- All children and young people have fair life chances
 - All children and young people are active citizens within their own community (new)

Our 4 Cross Cutting themes

- Strengthen Early Help
- 'Think Family' approach
- Narrowing the attainment and inequalities gap
- A skilled and competent workforce

All Children and Young People are Safe

- 1. Increase the number of children and young people living in safe, supportive families and communities.
- 2. Decrease the number of children and young people affected by unintended or accidental injury.
- 3. Increase the number of children and young people are protected from crime and anti-social behaviour.

All Children and Young People are Healthy

- 4. Increase the number of children and young people maintaining a healthy weight.
- 5. Increase the number of children and young people experiencing good emotional health, wellbeing and resilience.
- 6. Increase the number of children and young people free from the harm of substance misuse, including alcohol and tobacco.

All Children and Young People have Fair Life Chances

- 7.Ensure children and young people are supported to have the best start in life and be ready for learning.
- 8.Ensure children and young people are supported sufficiently to be able to achieve and that gaps in their educational outcomes are closed.
- 9.Ensure children and young people are able to access and maintain appropriate local education provision.
- 10.All children and young people are supported through key transitions, including into adulthood.

All Children and Young People are Active Citizens within their own Community

11. Ensure children and young people are supported to participate, have a voice and can influence change.

Consultation and Next Steps

- Strategy Groups / Early Help Board
- Draft is currently out for consultation with young people / service users groups of Commissioned Services
- Children and Young People's Network
- Wider VCS

Next Steps

- Further work on the draft CYPP December February
- Draft to be presented to LSCB in March 2018
- Draft CYPP to be signed of by CYP Sub-group March 21st 2018
- Final draft CYPP to be presented to H&WB for sign off on June 26th 2018





Better Mental Health: Implementing the Prevention Concordat Update 30 January 2018



Prevention Concordat

Includes:

- promoting good mental health and wellbeing
- preventing mental health problems and suicide
- improving the lives of people experiencing and recovering from mental health problems
- ...from early years and adolescence, through adults and parenthood and in to older age

Health & Wellbeing Board Leadership

- PH Leads from B&NES, Swindon and Wiltshire have met to discuss how plans/work to implement the Concordat can be shared and/or aligned
- The Health and Wellbeing Board confirmed at its November 2017 it's support for a Year of Mental Health
- Support, in principle, from Swindon & Wiltshire Health and Wellbeing Board Chairs (for further consideration by Swindon & Wiltshire H&W Boards)

Year of Mental Health April 2018-March 2019

Outcomes that might be achieved from a YoMH include:

- Sharing information, including with the public, about services and initiatives that prevent mental health crisis and promote good mental health and wellbeing
- Enabling and supporting collaborative working across a range of organisations, including VCSE sector
- Enabling and supporting innovation and sharing of best practice through some specific events (potential areas of focus, employer support to workforce wellbeing, tackling loneliness and isolation)
- Raising awareness of mental health and wellbeing and tackling stigma
- Promoting self-care and community resilience

Year of Mental Health April 2018-March 2019

- Initial planning session held including representatives of B&NES HWB, Public Health leads, MH Commissioners and VCSE sector representatives.
- Small planning group to be established to develop draft communications plan and schedule of events (some already planned, small number to be specifically designed).

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