

HEALTH AND WELLBEING BOARD

Minutes of the Meeting held

Tuesday, 20th June, 2023, 10.30 am

Councillor Paul May	Bath and North East Somerset Council
Paul Harris	Curo
Councillor Alison Born	Bath and North East Somerset Council
Sara Gallagher	Bath Spa University
Will Godfrey	Bath and North East Somerset Council
Julia Griffith	B&NES Enhanced Medical Services (BEMS)
Nicola Hazle	Bath and North East Somerset, Swindon and Wiltshire (BSW) Integrated Care Board (ICB)
Mary Kearney-Knowles	Bath and North East Somerset Council
Amritpal Kaur	Healthwatch
Ronnie Lungu	Avon and Somerset Police
Alice Ludgate	University of Bath
Kate Morton	Bath Mind
Rebecca Reynolds	Bath and North East Somerset Council
Val Scrase	HCRG Care Group
Suzanne Westhead	Bath and North East Somerset Council
Jocelyn Foster	Royal United Hospitals Bath NHS Foundation Trust
David Trethewey	Bath & North East Somerset Council

66 **WELCOME AND INTRODUCTIONS**

Cllr Paul May introduced himself as new Cabinet Member for children's services and Chair of the Health and Wellbeing Board. On behalf of the Board, he thanked the previous Chair, Cllr Dine Romero for her work in supporting the Board.

Members of the Board and officers introduced themselves.

67 **EMERGENCY EVACUATION PROCEDURE**

The Democratic Services Officer drew attention to the emergency evacuation procedure.

68 **APOLOGIES FOR ABSENCE**

Apologies had been received from:

Laura Ambler, Integrated Care Board

Sophie Broadfield, Director Sustainable Communities, Bath and North East Somerset Council (David Trethewey substitute)

Cara Charles-Barks, Chief Executive, RUH, Bath (Joss Foster substitute)

Jayne Davis, Bath College

Rachel Pearce, NHS England

69 **DECLARATIONS OF INTEREST**

Cllr Paul May reported that he was a non-executive Director of Sirona Health and Care which operated in Bristol, South Gloucestershire and North Somerset and if a conflict of interest arose at any future meeting, he would declare and withdraw from discussions.

David Trethewey declared an interest in item 15 "Better Care Fund update" and withdrew from the meeting during discussion of the item.

70 **TERMS OF REFERENCE**

The Board was asked to note the Terms of Reference when considering the following agenda items.

The Chair confirmed that the Terms of Reference would be reviewed at the November meeting which would be an opportunity to build on strengths in relation to tackling inequalities.

71 **TO ANNOUNCE ANY URGENT BUSINESS AGREED BY THE CHAIR**

The Chair read a statement in relation to the fatal stabbing of 16-year-old Mikey Royon in Bath:

- Specialist police family liaison officers were working with Mikey's family.
- The Major Crime Investigation Unit was leading the investigation and updates were available on the Avon and Somerset Constabulary website.
- Youth Connect South West and Project 28 were providing support for young people in the area.

- Children's services from Bath and North East Somerset Council as well as neighbouring authorities, youth workers and educational psychologists were working with local schools and police to provide support to young people affected by the incident.

Ronnie Lungu thanked Public Health and Bath Mind for their support and also thanked the community for their patience and support during the investigation.

72 PUBLIC QUESTIONS AND STATEMENTS

There were no public questions or statements.

73 MINUTES OF PREVIOUS MEETING

The minutes of the meeting held on 14 March 2023 were approved as a correct record and signed by the Chair.

74 OUTSTANDING ACTIONS

The action log was noted.

75 JOINT PRESENTATION ON STUDENT MENTAL HEALTH

Sara Gallagher and Alice Ludgate gave a joint presentation on university student mental health which was circulated separately and summarised below:

1. The reality inside universities: - *there was an **increased prevalence of mental illness**, 450% increase in declarations over the last 10 years:*
 - a. *Mental health was starting to overtake specific learning difficulties as the most disclosed disability*
 - b. *Main presentations: anxiety, depression*
 - c. *Increased number of eating disorders and acute mental health crises*
2. The student wellbeing services available at both universities
3. Themes, challenges and opportunities
4. Questions for the Board:
 - a. *How can we improve outcomes for student mental health in Bath?*
 - b. *How can we work more closely with statutory services, Integrated Care Alliance?*
 - c. *Bridging the gaps between services?*
 - d. *What is our next step to move this forward?*

The following responses were given in answer to questions raised by the presentation:

1. In terms of support for students with eating disorders, the provision had improved, but it would be useful to undertake a gap analysis to identify where further improvements could be made.
2. There was an inconsistency in pathways to mental health services and some providers were struggling with capacity.
3. There was a link between mental health and student accommodation, particularly in terms of the cost of accommodation in the B&NES area.
4. It was difficult to obtain precise statistics about the local rate of student suicide as the cause of a student death was not always shared with universities.

5. Students were asked about their mental health on receiving an offer and this was followed up on starting university. Students were encouraged to register with a local GP although it was noted that some students had complex needs and may need some care to remain in their home region.

Board members raised the following comments:

1. Kate Morton confirmed that Bath Mind worked closely with the Bath Universities as well as Bath College and stated there was a need to free up contracts and work differently and more creatively to ensure robust sustainable models to deliver services.
2. Paul Harris commented that it would be useful to measure the impact of the inhouse services provided by universities and how this benefitted other service providers, e.g., NHS.
3. Nicola Hazle referred to ICA work about integrated teams and undertook to link partners into this work. She reported work was also ongoing around supporting clinical leaders and this could include student wellbeing teams.
4. Val Scrase commented that there was a challenge around preventative work and how young people could be supported to prepare for university. It was noted that there was outreach work in local schools to prepare for the transition, but it was a challenge when students were coming from outside the area/from overseas to study in Bath.
5. Alex Luke confirmed that AWP could work with the universities to support referrals.
6. Sara Gallagher undertook to look into what information was available about the percentage of students that remained in the local area after graduating.
7. In terms of working closely with partners it was noted that universities were represented on community framework groups and Alice and Sara undertook to revisit their representation on these groups.
8. In terms of next steps, there was a Suicide Prevention Event taking place on 11 October and both universities were looking to build on this event to work more closely with partners.

On behalf of the Board the Chair thanked Sara, Alice and their teams for their work.

76 **JOINT PRESENTATION ON THE TRANSFORMATION OF MENTAL HEALTH SERVICES ACROSS BATH AND NORTH EAST SOMERSET**

Kate Morton and Alex Luke gave a joint presentation on the transformation of mental health services across Bath and North East Somerset which was circulated separately and summarised below:

1. Responding to our communities
2. End to end pathways
3. Partnership working for transformational services
4. BSW integrated Access service
5. Transformational Services in Partnership
6. Access Mental Health
7. Prevention/Early Intervention – Bath Mind and AWP
8. Focus – Bath Mind and AWP
9. Considerations for the Partnership:
 - a. *Improved system communication*
 - b. *Cost pressures – invest to save*

- c. *Sustainable and viable contractual and financial models*
- d. *Information sharing and managing risk*
- e. *Coordinated, real time service mapping*
- f. *Community engagement and co-production*
- g. *Consistent outcome measures –financial and social returns on investment*
- h. *Workforce strategy*
- i. *Estates strategy*
- j. *Improving technology as an enabler*

The Board raised the following comments:

1. The Chair commented that it would be useful to have a progress report on the transformation programme including analysis on whether there was a gap in disadvantaged communities accessing services.
2. Amrit Kaur reported that Healthwatch had received positive feedback on the services provided by the voluntary sector and stated that the funding of these services was important. She stated that a lot of users would prefer a co-ordinated approach to accessing mental health care rather than having to go to a GP for a referral. Kate Morton responded that there was a free phone number where people could access services and this needed to be better publicised. She commented that there had been a scoping exercise about a physical access point but there were challenges in terms of where this could be located.
3. In response to comments about workforce, Alex Luke confirmed that it was a huge challenge; there were a number of vacancies and a lot of agency staff supporting mental health services.

On behalf of the Board the Chair thanked Kate and Alex for the presentation- and welcomed a wider discussion on the issues raised.

77 **DRAFT BATH AND NORTH EAST SOMERSET, SWINDON AND WILTSHIRE INTEGRATED CARE SYSTEM IMPLEMENTATION PLAN 2023/24**

David Jobbins, Interim Deputy Director (Planning & Programmes), Integrated Care Board gave a presentation on the Draft Bath and North East Somerset, Swindon and Wiltshire Integrated Care System Implementation Plan 2023/24 as detailed in the papers circulated in advance of the meeting.

The Board RESOLVED to agree that the wording of the opinion that the Health and Wellbeing Board will provide on whether the plan takes proper account of B&NES JLHWS as follows:

“B&NES Health and Wellbeing Board has been asked to provide an opinion on whether the BSW Implementation Plan (the local version of the Joint Forward Plan) for the BSW Strategy takes proper account of the B&NES Joint Local Health and Wellbeing Strategy. We note that the BSW Strategy, from which this plan is derived, is focussed around the delivery of three Strategic Objectives which have been agreed across partners and were arrived at through a process of consideration of the priorities in the three local JLHWS, including the B&NES strategy, as part of a wider stakeholder engagement process. Themes from priorities in the B&NES Joint Local Health and Wellbeing Strategy flow well through the plan. The plan also includes a

chapter pulling out key 2023/24 deliverables from the local implementation plans for each of the three place based Integrated Care Alliances. The B&NES section well reflects delivery of relevant parts of the B&NES JLHWS.

The B&NES HWB is therefore happy to confirm that the BSW Implementation Plan does take proper and appropriate account of the B&NES JLHWS. The B&NES Board welcomes the opportunity to continue to be engaged in and contribute to future refreshes of the implementation plan.”

78 **HEALTH AND WELLBEING STRATEGY IMPLEMENTATION PLAN**

Becky Reynolds introduced the report and asked the Board to approve the plan. She confirmed that the process for the implementation of the plan would be brought back to the September meeting.

In response to a question about progress on the Bath and North East Somerset Economic Strategy which would tie in with the Health and Wellbeing Strategy, Will Godfrey confirmed that this was being drafted and would soon be out for consultation. He confirmed that the Council’s Corporate Strategy, Local Plan, and Economic Strategy would all align with the Health and Wellbeing strategy.

The Board noted the work of Fedalia Richardson and Nancy Towers in supporting the development of the Health and Wellbeing Strategy and asked that its gratitude be recorded.

The Board RESOLVED to:

- (1) Note the partnership engagement undertaken in the creation of the Joint Health and Wellbeing Strategy Implementation Plan.
- (2) Approve the Joint Health and Wellbeing Strategy Implementation Plan.

79 **BETTER CARE FUND UPDATE**

Judith Westcott, Senior Commissioning Manager gave a presentation on the Better Care Fund Update and asked the Board to approve the narrative plan which was circulated in advance of the meeting.

The following comments were raised by Board Members:

1. Will Godfrey reassured the Board that the Council had been through the narrative plan with rigour. He referred to the strategic priorities relating to admission avoidance and prevention and expressed concern that at a national level, there was too much emphasis placed on the speed of discharging people without considering the readmission rate.
2. Cllr Paul May noted that the funding was having an impact on reducing the length of stay of B&NES residents in hospitals and asked if there was any learning that could be shared with Wiltshire and Swindon where the figure was continuing to rise.

The Board RESOLVED to approve and sign off the Better Care Fund 2023-2025 Narrative Plan.

80 **SOCIAL PRESCRIBING**

Kate Morton reported that she and Laura Ambler would be giving a presentation to a future meeting but in the meantime, she asked for the support of the Board to set up a Task and Finish group to define social prescribing, what was meant by social prescribers and social prescription services, to map what was offered and identify gaps and funding routes.

The Board RESOLVED to: agree that a Social Prescribing Task and Finish Group be set up and a presentation on Social Prescribing would be included on the agenda for a future meeting.

81 KEY MESSAGES FROM THE MEETING

1. Bath Spa University and University of Bath have a range of in-house professional services, including mental health provision. The prevalence of mental health conditions and complex presentations continues to increase. As a result, universities are keen to establish formal and structured working partnerships with statutory and third sector agencies, to improve referral pathways, information sharing, mitigate against duplication of provision and reduce the touch points for service users.
2. Bath Mind and AWP gave a brief overview of the NHSE funded mental health transformation and the BANES response. Specifically resourcing early intervention and prevention and community-based provision, working in partnership to deliver improved pathways and involving wider partners.
3. The BSW Implementation plan reflects and complements our Health and Wellbeing Strategy for BANES; it will be available on the BSW website next month.
4. Following the sign off of the Health and Wellbeing Strategy and Implementation Plan, there is an ask of all members to take those documents back into their organisations and teams to share them and encourage their implementation. Resources to support colleagues in this will be sent to Board members.
5. The Bath and North East Somerset Council’s Corporate Strategy, Local Plan, Economic Strategy and HWB strategy will all be aligned and finalised later this year.
6. Better Care Fund Narrative Plan approved by the Board with NHS looking for even stronger focus on discharge from hospital; BCF locally has created positive outcomes and performed better on average than other areas (including Swindon and Wiltshire).
7. The Health and Wellbeing Board will set up a task & finish group to look into social prescribing.

The meeting ended at 12.37 pm

Chair

Date Confirmed and Signed

Prepared by Democratic Services